MINISTRY OF SCIENCE AND HIGHER EDUCATION OF THE RUSSIAN FEDERATION
Federal State Autonomous Educational Institution of Higher Education
Far Eastern Federal University
(FEFU)
INSTITUTE OF LIFE SCIENCES AND BIOMEDICINE (SCHOOL)

AGREED
Head of the EP

_____ Y.S. Khotimchenko
(Signed) (Name)
December 6, 2022

CLAIM
Director of the Department of Pharmacy and Pharmacology

_____ E.V. Khozhaenko
(Signed) (Surname)
December 6, 2022

WORK PROGRAM OF THE DISCIPLINE
Problems of organizing medical and preventive care for the population
Area of study 32.04.01 "Public Health"
Educational program "Leadership and governance in public health (program in English for foreign citizens)"
Form of training: full-time

Course 1 semester 2
Lectures 6 p.m.
Practical training 18 hours
total hours of classroom load 36 hours,
Self-study 36 hours.
Credit: Semester 2

The work program of the discipline is drawn up in accordance with the requirements of the Federal State Educational Standards of Higher Education in the direction of training 32.04.01 Public Health, approved by the order of the Ministry of Education and Science of the Russian Federation dated May 31, 2017 No. 485.

The work programme was discussed at the meeting of the Department of Pharmacy and Pharmacology, Minutes No. 4 dated December 6, 2022.

Director of the Department of Pharmacy and Pharmacology, Ph.D., E.V. Khozhaenko

Compiled by: Ph.D., Associate Professor Rasskazova V.N.

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1. The work program was revised at a meeting of the Department/Department/Division (implementing the discipline) and approved at a meeting of the Department/Department/Division (Graduating Structural Unit), minutes dated "____" _____ 2022. № _____

2. The work program was revised at the meeting of the Department/Department/Division (implementing the discipline) and approved at the meeting of the Department/Department/Division (Graduating Structural Unit), Minutes dated "____" _____ 2022. № _____

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4. The work program was revised at the meeting of the Department/Department/Division (implementing the discipline) and approved at the meeting of the Department/Department/Division (Graduating Structural Unit), Minutes dated "____" _____ 2022. № _____

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I. Goals and objectives of mastering the discipline:

Purpose:

study of the system of providing medical care to the attached population.

Tasks:

- public health and its determinants;
- systems to preserve, promote and restore the health of the population;
- organizational, medical and management technologies;
- trends in the development of healthcare in foreign countries and in Russia.

As a result of studying this discipline, students form the following universal, general professional and professional competencies (elements of competencies).

Professional competencies of graduates and indicators of their achievement:

Task type	Code and name of professional competence (result of mastering)	Code and name of the competency indicator
Organizational and managerial	PC-3 Ability to organize, plan and control the activities of a structural unit of a medical organization	PC-3.1 Knows Standards of Care PC-3.2 Is able to assess the resources of a medical organization and implement a quality management system PC-3.3 Possesses the necessary skills in the preparation of reporting documentation, assessment of the activities of a health care institution
Organizational and managerial	PC-5 Ability to assess the effectiveness of a medical organization, develop and select optimal management solutions, develop a business plan for the development of a medical organization, use a process approach in the management of a medical organization, use technological maps of the processes of a medical organization	PC-5.1 Knows the methods of planning a medical organization PC-5.2 Is able to draw up a plan for a medical organization, develop business planning and investment projects PC-5.3 Proficient in planning, development of business planning and investment projects

Code and name of the competency indicator	Name of the assessment indicator (the result of learning in the discipline)
PC-3.1 Knows Standards of Care	Knows the standards of medical care Knows how to provide first aid Proficient in first aid
PC-3.2 Is able to assess the resources of a medical organization and implement a quality management system	Knows the quality management system of a medical organization Is able to assess the resources of a medical organization and implement a quality management system Proficient in assessing the resources of a medical organization and implementing a quality management system
PC-3.3 Possesses the necessary skills in the preparation of reporting documentation, assessment of the activities of a health care institution	Knows the reporting documentation of the medical organization Is able to prepare reporting documentation for a medical organization Possesses the necessary skills for the preparation of reporting documentation, assessment of the activities of a health care institution
PC-5.1 Knows the methods of planning a medical organization	Knows the methods of planning a medical organization Able to plan the work of a medical organization
PC-5.2 Is able to draw up a plan for a medical organization, develop business planning and investment projects	Knows the rules for drawing up a plan for a medical organization, developing a business plan, an investment project Is able to draw up a plan for a medical organization, develop business planning and investment projects Possesses the skill of drawing up a plan for a medical organization, developing business and investment projects
PC-5.3 Proficient in planning, development of business planning and investment projects	Knows the principles of goal-setting, types and methods of organizational planning and fundamental concepts of financial management, as well as the method of process approach to the management of a medical organization Able to develop corporate, competitive and functional strategies for the development of the organization, develop investment projects and conduct their verification He is proficient in the methods of formulating and implementing strategies at the level of a business unit, developing and implementing marketing programs, as well as methods of investment analysis and analysis of financial markets, a process approach in the management of a medical organization and the possibility of using technological maps of the processes of a medical organization.

For the formation of the above competencies within the framework of the discipline "Problems of organizing medical and preventive care for the population", the following methods of active/interactive learning are used: lectures - conferences, problem-based lectures, lectures-visualizations; practical classes - dispute, round table (preparation and discussion of abstracts).

II. Labor intensity of the discipline and types of training in the discipline

The total labor intensity of the discipline is 2 credits (72 academic hours).

Designation	Types of Study Sessions and Student Work
L	Lectures
Ave	Practical exercises
Pr electr.	
WED:	Student's independent work 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

a. Structure of the discipline:

Form of study – full-time

№	Section Name Discipline	Semester	Number of hours by type of training and work of the student						Forms of intermediate attestation
			Lek	Lab	Ave	OK	WED	Control	
1	Deontology	2	9		9		18	-	
2	Medical Law		9		9		18		
	Total:	2	18	-	18	-	36	-	Credit

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

(6 p.m., including 4 hours with the use of MAO)

Topic 1. Russian Legislation on Health Care. Structure, Functions, Chain of Command and Cooperation in the Health System (4 hours)

Russian Legislation on Health Care. Structure of the health care system. Functions of the health care system. Order of subordination and cooperation in the health care system.

Topic 2. Nomenclature of health care institutions. Licensing and Accreditation of Medical Organizations and Medical Professionals (4 hours)

Nomenclature of health care institutions. Licensing of medical organizations and medical professionals. Accreditation of medical organizations and medical professionals.Standardization in the health care system.

Topic 3. Regulatory Framework Governing the Rights and Responsibilities of Health Professionals (4 hours)

Regulatory framework governing the rights and responsibilities of health professionals. Associations of health professionals.

Topic 4. Healthcare Management in Market Conditions (3 hours)

Healthcare Management in Market Conditions. Laws of Control. Principles of management.

Topic 5. Systematic Approach to Healthcare Management (3 hours)

Systematic approach to management. Methods of management in modern conditions.

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

Practical exercises

(6 p.m., including 6 hours with the use of MAO)

Section 1. Principles of organization of outpatient, inpatient, emergency, high-tech medical care (12 hours)

Class 1. General Principles of Organization of Outpatient, Inpatient, Outpatient, Emergency and Inpatient Medical Care (4 hours)

1. General principles of the organization of medical and preventive care for the population.
2. Organization of outpatient medical care.
3. Organization of inpatient medical care.
4. Organization of outpatient care.
5. Ambulance and emergency medical care for the population.
6. Inpatient department of the hospital.
7. Structure and functions of the admission department.
8. Organization of the work of medical personnel.
9. Forms and methods of control over the quality of diagnostics and treatment of patients in the hospital.

Class 2. Organization of specialized, high-tech and preventive care for the population. Organization of material and medical supplies, medical documentation in the hospital and polyclinic (4 hours)

1. Organization of specialized medical care.
2. Organization of high-tech medical care.
3. Medical and social rehabilitation.
4. Organization, tasks, content, methods and means of hygienic education and upbringing of the population.
5. Organization of material and medical supplies in hospitals and clinics.
6. Medical records.
7. Methods of performance evaluation.

Class 3. Organization of nursing activities. Dispensary method of observation. Organization of medical care for citizens working at industrial enterprises (4 hours)

1. Nursing care in outpatient clinics and hospitals (institutions).
2. Essence and indications for the use of the dispensary method.
3. Content and Technologies of Dispensary Observation of Certain Groups of Population and Patients.
4. Types of special dispensaries.
5. Indicators of the quality and efficiency of medical examinations.
6. Organization of first aid at enterprises.

Section 2. Organization of medical care in the system of childhood and obstetrics (6 hours)

Class 4. State Policy in the Field of Maternal and Child Health (3 hours)

1. Russian legislation on the protection of motherhood and childhood.
2. Main objectives of women's and children's health.
3. Organization of obstetric care.
4. Qualitative Indicators of the Activity of the Antenatal Clinic and the Hospital of the Maternity Hospital.
5. Organization of gynecological care.

Class 5. Organization of outpatient and inpatient care for children (3 hours)

1. Basic Principles of Therapeutic and Preventive Services for Children of Different Ages.
2. Children's polyclinic, its structure.
3. Children's Hospital In-Patient Department.
4. Forms and methods of operation of the ambulance station (SSMP) to serve the children's population.
5. Organization of medical care for preschool children.

Schedule of independent work in the discipline

№ p/n	Due Date/Deadlines	Type of independent work	Approximate time limits for execution	Form of control
1	1-6 weeks	Preparation of abstracts	12 hours	Protection
2	Week 7- 12	Preparing a presentation	12 hours	Protection
3	Week 13-18	Preparation To the credit	12 hours	Credit

Recommendations for Student Self-Study

The purpose of the student's independent work is to work meaningfully and independently, first with educational material, then with scientific information, to lay the foundations of self-organization and self-education in order to instill the ability to continuously improve their professional qualifications in the future.

The process of organizing students' independent work includes the following stages:

- preparatory (definition of goals, preparation of a program, preparation of methodological support, preparation of equipment);
- the main one (implementation of the program, the use of techniques for searching for information, assimilation, processing, application, transfer of knowledge, recording the results, self-organization of the work process);
- final (assessment of the significance and analysis of the results, their systematization, assessment of the effectiveness of the program and methods of work, conclusions on the directions of labor optimization).

In the process of independent work, the student acquires the skills of self-organization, self-control, self-management, self-reflection and becomes an active independent subject of educational activity. Independent work of students should have an important impact on the formation of the personality of the future specialist, it is planned by the student independently. Each student independently determines the mode of his work and the measure of work spent on mastering the educational content in each discipline. He performs extracurricular work according to a personal individual plan, depending on his preparation, time and other conditions.

Students' independent work consists of preparing for practical classes, working on recommended literature, writing reports on the topic of the seminar, preparing presentations and essays.

The teacher offers each student individual and differentiated assignments. Some of them can be carried out in a group (for example, the preparation of a report and a presentation on the same topic can be done by several students with a division of their responsibilities - one prepares the scientific and theoretical part, and the second analyzes the practice).

Methodical recommendations for students' independent work

In the course of mastering the material on the subject of the discipline, it is planned to perform independent work of students on the collection and processing of literary material to expand the field of knowledge in the discipline being studied, which allows you to deepen and consolidate specific practical knowledge obtained in classroom classes. For the study and full mastering of the program material in the discipline, educational, reference and other literature recommended by this program, as well as specialized periodicals, are used.

In independent preparation for classes, students take notes of the material, independently study questions on the topics covered, using educational literature from the proposed list, periodicals, scientific and methodological information, databases of information networks (Internet, etc.).

Independent work consists of such types of work as studying material from textbooks, reference books, video materials and presentations, as well as other reliable sources of information; Preparation for the test. To consolidate the material, it is enough to mentally reconstruct the material by flipping through the synopsis or reading it. If necessary, refer to the recommended educational and reference literature, write down incomprehensible points in the questions to clarify them in the upcoming lesson.

Preparation for practical exercises. This type of independent work consists of several stages:

1) Revision of the material studied. For this purpose, lecture notes, recommended basic and additional literature are used;

2) Deepening knowledge of the topic. It is necessary to differentiate the available material in lectures and manuals in accordance with the points of the practical lesson plan. Separately, write down unclear questions and terms. It is better to do this in the margins of a lecture notes or a study guide. Clarification should be carried out with the help of reference literature (dictionaries, encyclopedic publications, etc.);

3) Drawing up a detailed plan of performance, or calculations, solving problems, exercises, etc. In preparation for practical classes, students take notes of the material, prepare answers to the given questions on the topics of practical classes. In addition to the practical material, students independently study questions on the topics covered, using educational literature from the proposed list, periodicals, scientific and methodological information, databases of information networks (Internet, etc.).

Requirements for the presentation and design of the results of independent work

There are no special requirements for the submission and registration of the results of this independent work.

Recommendations for Abstracting Educational and Scientific Literature

Abstracting of educational and scientific literature involves an in-depth study of individual scientific works, which should ensure the development of the necessary skills for working on the book. All this will contribute to the expansion of scientific horizons, the improvement of their theoretical training, and the formation of scientific competence.

Textbooks, individual monographic studies and articles on issues provided for by the program of the academic discipline are offered for abstracting. When selecting literature on the chosen issue, it is necessary to cover the most important areas of development of this science at the present stage. Particular attention should be paid to those literary sources that (directly or indirectly) can help the specialist in his practical activities. However, this section also includes works and individual studies on issues that go beyond the discipline being studied. It is recommended to use this literature if you want to expand your knowledge in any branch of science.

Along with the literature on general issues for masters, literature is assumed, taking into account the profile of their professional activity, obtained independently. Not all the proposed literature is equal in content and volume, so different approaches to its study are possible. In one case, it can be a general abstract of several literary sources of different authors devoted to the consideration of the same issue, in the other case, it can be a detailed study and abstract of one of the recommended works or even its individual sections, depending on the degree of complexity of the issue (problematic). In order to decide what to do in each case, you should consult with the teacher.

The choice of a specific work for the abstract should be preceded by a detailed acquaintance with the list of all literature given in the curriculum of the discipline. It is recommended to first familiarize yourself with the selected work by looking at the subheadings, highlighted texts, diagrams, tables, and general conclusions. Then it is necessary to read it carefully and thoughtfully (delving into the ideas and methods of the author), making notes on a separate sheet of paper about the main provisions and key issues. After reading, you should think over the content of the article or a separate chapter, paragraph (if we are talking about a monograph) and briefly write it down. Only strict definitions and formulations of laws should be written out verbatim. Sometimes it's helpful to include one or two examples to illustrate. In the event that there are unclear passages, it is recommended to read the following exposition, as it can help to understand the previous material, and then return to the comprehension of the previous exposition.

The result of the work on literary sources is an abstract.

When preparing an abstract, it is necessary to highlight the most important theoretical provisions and substantiate them independently, paying attention not only to the result, but also to the methodology used in the study of the problem. Reading scientific literature should be critical. Therefore, it is necessary to strive not only to assimilate the main content, but also the method of proof, to reveal the features of different points of view on the same issue, to assess the practical and theoretical significance of the results of the reviewed work. A very desirable element of the abstract is the expression by the listener of his own attitude to the ideas and

conclusions of the author, supported by certain arguments (personal experience, statements of other researchers, etc.).

As mentioned above, abstracts of monographs and journal articles of a research nature must contain a definition of the problem and specific objectives of the research, a description of the methods used by the author, as well as the conclusions that he came to as a result of the research. The proposed literature for abstracting is constantly updated.

Guidelines for writing and formatting an abstract

An abstract (from the Latin refero – I report, report) is a brief summary of a problem of a practical or theoretical nature with the formulation of certain conclusions on the topic under consideration. The problem chosen by the student is studied and analyzed on the basis of one or more sources. Unlike a term paper, which is a comprehensive study of a problem, an essay is aimed at analyzing one or more scientific papers.

The objectives of writing an abstract are:

- development of students' skills in finding topical problems of modern legislation;
- development of skills of concise presentation of material with highlighting only the most essential points necessary to reveal the essence of the problem;
- development of skills for analyzing the studied material and formulating their own conclusions on the chosen issue in writing, in a scientific, literate language.

The objectives of writing an abstract are*:*

- to teach the student to convey the opinions of the authors, on the basis of whose works the student writes his essay, as correctly as possible;
- teach the student to competently state his/her position on the problem analyzed in the essay;
- prepare the student for further participation in scientific and practical conferences, seminars and competitions;
- help the student to determine the topic of interest to him, the further disclosure of which can be carried out when writing a term paper or a diploma;
- Understand for yourself and state the reasons for your agreement (disagreement) with the opinion of this or that author on this or that problem.

An essay is a creative activity of a student, which reproduces in its structure research activities to solve theoretical and applied problems in a certain branch of scientific knowledge. For this reason, coursework is the most important component of the educational process in higher education.

An essay, being a model of scientific research, is an independent work in which the student solves a problem of a theoretical or practical nature, applying

scientific principles and methods of this branch of scientific knowledge. The result of this scientific research can 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 a report at a scientific and practical conference, as well as in the form of a scientific article.

The abstract involves the acquisition of skills for building business cooperation based on ethical standards of scientific activity. Purposefulness, initiative, disinterested cognitive interest, responsibility for the results of one's actions, conscientiousness, competence are the personal qualities that characterize the subject of research activities that correspond to the ideals and norms of modern science.

An essay is an independent educational and research activity of a student. The instructor provides advice and evaluates the process and results. He provides an approximate topic of abstract work, clarifies the problem and research topic together with the resident, helps to plan and organize research activities, appoints the time and the minimum number of consultations.

The teacher accepts the text of the essay for review at least ten days before the defense.

Traditionally, there is a certain structure of the abstract, the main elements of which, in the order of their arrangement, are the following:

1. Title page.
2. Task.
3. Table of Contents.
4. List of symbols, symbols and terms (if necessary).
5. Introduction.
6. Main part.
7. Conclusion.
8. References.
9. Applications.

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

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

The table of contents (contents) 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 the 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

significant difficulties. However, it is the high-quality introduction that is the key to understanding the entire work, testifying to the professionalism of the author.

Thus, the introduction is a very important part of the abstract. The introduction should begin with a justification of the relevance of the chosen topic. When applied to an abstract, the concept of "relevance" has one peculiarity. How the author of the essay is able 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 training.

In addition, in the introduction, it is necessary to identify the methodological base of the abstract, 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 familiarity with specialized literature, his ability to systematize sources, critically consider them, highlight the essential, and 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, the purpose and objectives, and the chronological framework of the study.

The introduction concludes with a statement of general conclusions about the scientific and practical significance of the topic, the degree of its study and provision with 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 provided as an argument and to illustrate the proposed provisions. The author needs to demonstrate 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 conditioned by the logic of the research, which is in the form of a synthesis of the scientific information accumulated in the main part. This synthesis is a consistent, logically harmonious presentation of the results obtained and their correlation 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 the theoretical materials.

So, the conclusion of the abstract should include: a) the conclusions of the study; 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 the references. This list is one of the essential parts of the abstract and reflects the independent creative work of the author of the abstract.

A list of the sources used is placed at the end of the work. It is drawn up either in alphabetical order (by the author's surname 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 the writing of 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.

Basic requirements for the content of the abstract

Students should use only those materials (scientific articles, monographs, manuals) that are directly related to the topic they have chosen. Detached reasoning that is not related to the problem under analysis is not allowed. The content of the abstract should be specific, only one problem should be investigated (several are allowed, only if they are interrelated). The student must strictly adhere to the logic of the presentation (start with the definition and analysis of concepts, proceed to the formulation of the problem, analyze the ways to solve it and draw appropriate conclusions). The abstract should end with conclusions on the topic.

In terms of its *structure* , the abstract consists of:

1. Title page*;*

2. Introduction, where the student formulates the problem to be analyzed and researched;

3. The main text, in which the selected topic is sequentially revealed. Unlike a term paper, the main text of the abstract involves dividing into 2-3 paragraphs without highlighting chapters. If necessary, the text of the abstract can be supplemented with illustrations, tables, graphs, but they should not "overload" the text;

4. Conclusions, where the student formulates conclusions drawn on the basis of the main text.

5. List of references. This list includes both those sources that the student refers to when preparing the essay, and others that were studied by him when preparing the essay.

The volume of the abstract is 10-15 pages of typewritten text, but in any case should not exceed 15 pages. Spacing – 1.5, font size – 14, margins: left – 3 cm, right – 1.5 cm, top and bottom – 1.5 cm. Pages should be numbered. The paragraph indentation from the beginning of the line is 1.25 cm.

The procedure for submitting an essay and its evaluation

Essays are written by students during the semester within the deadlines set by the teacher in a particular discipline, reported by the student and submitted for discussion. The printed version is handed over to the teacher who teaches the course.

Based on the results of the test, the student is given a certain number of points, which is included in the total number of points scored by the student during the semester. When evaluating the abstract, the correspondence of the content to the chosen topic, the clarity of the structure of the work, the ability to work with scientific literature, the ability to pose a problem and analyze it, the ability to think logically, knowledge of professional terminology, and literacy of design are taken into account.

Guidelines for Preparing Presentations

To prepare a presentation, it is recommended to use: PowerPoint, MS Word, Acrobat Reader, LaTeX beamer package. The simplest program for creating presentations is Microsoft PowerPoint. To prepare a presentation, it is necessary to process the information collected when writing an abstract.

Sequence of presentation preparation:

1. Clearly state the purpose of the presentation.

2. Determine what the format of the presentation will be: live performance (how long it will be) or e-mailing (what will be the context of the presentation).

3. Select all the content for the presentation and build a logical chain of presentation.

4. Identify the key points in the content of the text and highlight them.

5. Determine the types of visualization (pictures) to be displayed on slides in accordance with the logic, purpose and specifics of the material.

6. Choose the design and format the slides (the number of pictures and text, their location, color and size).

7. Check the visual perception of the presentation.

Types of visualization include illustrations, images, diagrams, tables. An illustration is a representation of a real-life visual series. Images, as opposed to illustrations, are metaphors. Their purpose is to evoke an emotion and create an attitude towards it, to influence the audience. With the help of well-thought-out and presented images, information can stay in a person's memory for a long time. Diagram – visualization of quantitative and qualitative relationships. They are used for convincing demonstration of data, for spatial thinking in addition to logical thinking. A table is a concrete, visual and accurate display of data. Its main purpose is to structure information, which sometimes makes it easier for the audience to perceive the data.

Practical tips for preparing a presentation

- printed text + slides + handouts are prepared separately;

- slides – visual presentation of information, which should contain a minimum of text, a maximum of images that carry a semantic load, look clear and simple;

- the textual content of the presentation – oral speech or reading, which should include arguments, facts, evidence and emotions;

- the recommended number of slides is 17-22;

- mandatory information for the presentation: topic, surname and initials of the speaker; Communication plan brief conclusions from all that has been said; list of references;

- handouts – should provide the same depth and reach as a live performance: people trust what they can take with them more than disappearing images, words and slides are forgotten, and the handout remains a constant tangible reminder; It is important to hand out handouts at the end of the presentation; Handouts should be different from slides, they should be more informative.

Criteria for evaluating the abstract

The stated understanding of the abstract as an integral author's text determines the criteria for its evaluation: novelty of the text; the reasonableness of the choice of source; the degree of disclosure of the essence of the issue; compliance with the requirements for registration.

Novelty of the text: a) relevance of the research topic; b) novelty and independence in the formulation of the problem, formulation of a new aspect of the known problem in the establishment of new connections (interdisciplinary, intra-subject, integration); c) ability to work with research, critical literature, systematize and structure material; d) the manifestation of the author's position, the independence of assessments and judgments; e) stylistic unity of the text, unity of genre features.

Degree of disclosure of the essence of the issue: a) correspondence of the plan to the topic of the abstract; b) correspondence of the content to the topic and outline of the abstract; c) completeness and depth of knowledge on the topic; d) the validity of the ways and methods of working with the material; f) the ability to generalize, draw conclusions, compare different points of view on one issue (problem).

Validity of the choice of sources: a) assessment of the literature used: whether the most famous works on the topic of research (including journal publications of recent years, the latest statistical data, summaries, references, etc.) are involved.

Compliance with the requirements for formatting: a) how correctly the references to the literature used, the list of references; b) assessment of literacy and

culture of presentation (including spelling, punctuation, stylistic culture), knowledge of terminology; c) compliance with the requirements for the length of the abstract.

The reviewer should clearly formulate a comment and questions, preferably with references to the work (it is possible to specific pages of the work), to research and factual data that the author did not take into account.

The reviewer can also indicate: whether the student has addressed the topic before (essays, written works, creative works, Olympiad works, etc.) and whether there are any preliminary results; how the graduate conducted the work (plan, intermediate stages, consultation, revision and revision of the written or the absence of a clear plan, rejection of the recommendations of the supervisor).

The student submits an abstract for review no later than a week before the defense. The reviewer is the teacher. Experience shows that it is advisable to familiarize the student with the review a few days before the defense. Opponents are appointed by a teacher from among the students. 10-20 minutes is enough for a student to make an oral presentation (this is about the time it takes to answer the exam tickets).

Grade 5 is given if all the requirements for writing and defending an abstract are met: the problem is identified and its relevance is justified, a brief analysis of various points of view on the problem under consideration is made and one's own position is logically stated, conclusions are formulated, the topic is fully disclosed, the volume is maintained, the requirements for external design are met, correct answers to additional questions are given.

Grade 4 – the main requirements for the abstract and its defense have been met, but at the same time there are shortcomings. In particular, there are inaccuracies in the presentation of the material; there is no logical consistency in judgments; the volume of the abstract is not maintained; there are omissions in the design; Incomplete answers were given to additional questions during the defense.

Grade 3 – there are significant deviations from the requirements for abstracting. In particular: the topic is covered only partially; factual errors were made in the content of the abstract or when answering additional questions; There is no conclusion during the defense.

Grade 2 – the topic of the abstract is not disclosed, a significant misunderstanding of the problem is revealed.

Grade 1 – the abstract is not submitted by the student.

Self-paced tasks

1. On the given topic of the simulation game, an analysis of the literature on the discipline under study should be carried out. Based on the material worked out, an imitation game should be prepared and presented for discussion.

2. Writing an essay on a topic proposed by the teacher or independently chosen by the student and agreed with the teacher.

3. Preparation of presentations using multimedia equipment.

List of Types of Student's Independent Work

The study of lectures and preparation for a practical lesson, the preparation of a report on a selected aspect of the topic or the selection of practical material for participation in a discussion constitute the content of the student's independent work. Lecture notes, professional literature, educational and methodological support of the discipline can become material for preparation. Forms of current control: survey, group discussion, control tasks, presentation of the report.

One of the necessary components of successful completion of the course is writing an essay.

Independent work of students implies preparation for a lecture course, independent information search. Writing and defending the final test form the skills of working with specialized literature, the ability to analyze topical problems, as well as the ability to logically correctly formulate the results of one's research in written and oral form.

Abstract Topics

1. Sanitary and Epidemiological Station, Structure and Functions. Forms of interaction between sanitary-prophylactic and medical-prophylactic organizations.
2. Rights and Obligations of Medical Workers in the Provision of Medical Care.
3. Traumatism as a medical and social problem. A system of therapeutic and preventive measures to combat injuries.
4. Models of health care systems in foreign countries.
5. Medical Ethics and Deontology. Fulfillment of medical duty, legal and moral aspects of medical confidentiality and medical errors.
6. Infectious Diseases as a Medical and Social Problem.
7. Health Care Planning in the Context of Market Relations. Planning methods.
8. Medical and social aspects of mental illness, alcoholism, drug addiction, substance abuse. Organization of psychiatric and narcological care.
9. Rules for issuing certificates of incapacity for work for caring for a sick family member.

10. The concept of medical statistics. The importance and use of statistics in social and hygienic research and for the evaluation of the activities of the health care organization.

11. Statistical population, its types and group properties.

12. Relative Values in Statistics, Their Meaning and Application. Possible errors when relative values are applied incorrectly.

13. Time series and its indicators. Use of these indicators in statistical research.

14. Average values, their application in the study of the state of health of the population. Assessment of the reliability of average values.

15. Methods for calculating the relationship between features in medical statistics.

16. Evidence-Based Medicine, Concept, Role and Place in the Health Care System.

17. Gradations of recommendations based on levels of evidence in evidence-based medicine. Levels of Evidence in the Evidence-Based Medicine System.

18. Clinical studies, classification, characteristics of each species.

19. Systematic review and meta-analysis in evidence-based medicine.

20. Demographics. Methodology of accounting, calculation, assessment and analysis of the main indicators of the natural movement of the population.

21. The concept of fertility and fertility rates. Methods of their calculation and analysis. Trends in these indicators in Russia and Primorsky Krai.

22. Demography and its medical and social aspects. Current Problems and Trends of Population Reproduction.

23. Mortality of the population, methods of study. Statistical data for Russia and other countries. Main causes of mortality of the population.

24. Types of morbidity of the population. Their medical and social aspects and methods of study.

25. Population statistics. Methodology of study and basic data for Russia and countries of the world. The Importance of Population Statics Data for Health Assessment.

26. Indicators of the natural movement of the population. Methodology for calculating indicators and their analysis.

27. The Concept of Social Gerontology.

28. The role of the health insurance system in protecting the health of citizens of the Russian Federation.

Criteria for Evaluating Students' Independent Work

When assessing students' knowledge, not only the amount of knowledge is taken into account, but, first of all, the quality of material assimilation, understanding of the logic of the academic discipline, the ability to freely, competently, logically coherently present what has been studied, the ability to defend one's own point of view with arguments.

The answer to independent tasks, in which the material is presented systematically, logically and consistently, is graded as "excellent".

A "good" assessment presupposes knowledge of the material and the ability to draw independent conclusions, comment on the material presented; A response with minor flaws.

"Satisfactory" is the assessment of the assimilation of the material when the student has not studied some sections deeply enough, allows unclear formulations, gives incomplete answers.

"Unsatisfactory" is given in the case when the student does not know a significant part of the educational material, makes significant mistakes; Knowledge is haphazard.

V. EDUCATIONAL AND METHODICAL SUPPORT OF STUDENTS' INDEPENDENT WORK

Independent work is defined as individual or collective learning activities carried out without the direct supervision of the teacher, but according to his tasks and under his supervision. Independent work is a cognitive learning activity, when the sequence of the 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 students' independent work is to acquire the necessary competencies in their field of training, experience in creative and research activities.

Forms of independent work of students:

- work with basic and additional literature, Internet resources;
- independent acquaintance with the lecture material presented on electronic media in the library of the educational institution;
- preparation of abstract reviews of periodical sources, 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 classroom tests;

- doing home tests;
- performing test tasks, solving problems;
- compilation of crosswords, schemes;
- preparation of reports for presentation at a seminar or conference;
- filling out a workbook;
- writing essays, term papers;
- preparation for business and role-playing games;
- resume writing;
- preparation for tests and exams;
- other Views Activities Organized andcarried out by the educational institution and student self-government bodies.

VI. MONITORING THE ACHIEVEMENT OF THE COURSE OBJECTIVES

Item No.	Supervised modules/sections/topics of the discipline	Codes and Stages of Competency Formation		Valuation Tools – Name	
				Current control	Intermediate Attestation
1	Section 1 Principles of organization of outpatient, inpatient, emergency, high-tech medical care	PC-3.1; PP-3.2; PP-3.3; PP-5.1; PC-5.2; PC-5.3	Knows	Interview UO-1, abstract PR-4	Credit Questions 1-26
			Can	Tests PR-1, essays PR-3, case problems PR-11, presentation	
			Owns	Work in small groups, UO-3	
2	Section 2. Organization of medical care in the system of childhood and obstetrics	PC-3.1; PP-3.2; PP-3.3; PP-5.1; PC-5.2; PC-5.3	Knows	Interview UO-1, abstract PR-4	Credit Questions 27-50
			Can	Tests PR-1, essays PR-3, case problems PR-11, presentation	
			Owns	Work in small groups, UO-3	

VII. EDUCATIONAL AND METHODOLOGICAL SUPPORT OF THE DISCIPLINE

Reference citations

1. Public Health and Health Care [Elektronnyi resurs]: uchebnik / V.A. Medik, V.I. Lisitsin. - 4th ed., revised and supplemented - Moscow: GEOTAR-Media, 2016. – 496 p. http://www.studentlibrary.ru/book/ISBN9785970437018.html

2. Public Health and Health Care [Elektronnyi resurs]: uchebnik / Medik V. A., Yuriev V. K. - 2nd ed., ispr. i dop. - M. : GEOTAR-Media, 2016. – 608 p. (in Russian). http://www.studentlibrary.ru/book/ISBN9785970437100.html

3. Public Health and Health Care [Elektronnyi resurs]: uchebnik / V. A. Medik, V. K. Yuriev - 3rd ed., revised and supplemented - Moscow: GEOTAR-

Media, 2014. – 288 p. http://www.studentlibrary.ru/book/ISBN9785970428689.html

4. Sbornik testovykh zadachi po obshchestvennomu zdorov'stvo i zdravookhraneniyu [Elektronnyi resurs]: uchebnoe posobie [Elektronnyi resurs]: uchebnoe posobie / E.L. Borshchuk [i dr.]. — Electron. Text data. — Orenburg: Orenburg State Medical Academy, 2014. — 118 p. — 2227-8397. — Mode of access: http://www.iprbookshop.ru/51490.html

5. Lisitsin Y.P., Ulumbekova G.E. Public Health and Healthcare. - GEOTAR-Media. – 2013. – 544 p. Mode of access: http://www.studentlibrary.ru/book/ISBN9785970426548.html

6. Public Health and Health Care, Health Economics [Elektronnyi resurs] / ed. by V.Z. Kucherenko - M. : GEOTAR-Media, 2013. – 160 p. http://www.studentlibrary.ru/book/ISBN9785970424155.html

Further reading

1. Lisitsyn Yu.P., Ulumbekova G.E. Public Health and Health Care: Textbook. Moscow: GEOTAR – Media, 2016. 542 p. (in Russian).http://lib.dvfu.ru:8080/lib/item?id=chamo:781664&theme=FEFU

2. Medik V.A., Yuriev V.K. . Public Health and Healthcare. Textbook. Moscow: GEOTAR-Media, 2014. 287 p. (in Russian). http://lib.dvfu.ru:8080/lib/item?id=chamo:730369&theme=FEFU

3. Pokrovskiy V.I., Briko N.I. General Epidemiology with the Basics of Evidence-Based Medicine GEOTAR-Media. – 2012. – 400 p. Mode of access:http://www.studentlibrary.ru/book/ISBN9785970417782.html

4. Petrov V.I., Nedogoda S.V. Evidence-Based Medicine GEOTAR-Media. – 2012. – 144 p. Access mode: http://www.studentlibrary.ru/book/ISBN9785970423219.html

List of resources of the information and telecommunication network "Internet" necessary for mastering the discipline

1. Patent Database and Patent Search http://www.freepatent.ru/
2. NEB - http://elibrary.ru
3. http://ru.wikipedia.org/wiki/
4. http://www.twirpx.com/
5. http://edu.znate.ru/docs/3997/index-94535-6.html

6. Electronic Library of Books on Economics http://www. inetlib. ru/content/category/1/18/3/

7. Russian Journal of Business and Personal Security, coverage of processes taking place in the field of commercial security. http://www. bdi. spb. ru

8. Electronic library of books on management http://www. inetlib. ru/content/category/4/4/4/

9. Student Library http://www.studmedlib.ru

10.http://www.medliter.ru/?page=list&id=09 a.m.

11.http://www.rmj.ru/medjurnrus.htm

12. Legal reference system Consultant Plus.

13.http://vladmedicina.ru Medical portal of Primorsky Krai

14.http://www.r o sminzdrav.ru Official website of the Ministry of Health of the Russian Federation

15.http://meduniver.c om Medical website 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 high data compression ratio;

– ABBYY FineReader 11 is a software for optical character recognition;

– Adobe Acrobat XI Pro is a software package for creating and viewing electronic publications in PDF format;

– ESET Endpoint Security is a comprehensive protection for Windows-based workstations. Virtualization support + new technologies;

– WinDjView 2.0.2 is a program for recognizing and viewing files with the DJV and DjVu formats of the same name.

VIII. METHODICAL INSTRUCTIONS FOR MASTERING THE DISCIPLINE

Practical classes of the course "Problems of organizing medical and preventive care for the population" are conducted in all sections of the curriculum and are aimed at developing students' skills for independent research work. In the course of practical classes, the student completes a set of tasks 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, there is the development of skills of independent research in the process of working with scientific literature, periodicals, the formation of the ability to defend one's point of view with arguments, listen to others, answer questions, and conduct discussions.

Lectures are focused on covering the main topics in each section of the course and are designed to orient students in the proposed material, lay the scientific and methodological foundations for further independent work of students.

Independent work on the course *is especially important for the professional training* of students. In the course of this work, students select the necessary material on the issue under study and analyze it. Independent work with literature includes such techniques as drawing up a plan, theses, notes, annotating sources, writing tests.

Students should be introduced to the main sources, without which it is impossible to fully understand the problems of the course. Therefore, these sources are recommended for students for home study and are included in the program.

The course should contribute to the development of skills for informed and independent evaluations of facts and scientific concepts. Therefore, in all forms of knowledge control, especially when passing a test, attention should be paid to the understanding of the main problem field, to the ability to critically use its results and conclusions.

In the process of teaching the discipline, the following methods of active/interactive learning are used:

Lectures:

1. Problematic lecture.

The lecture begins with the teacher's statement of the problems, which are solved in the course of the presentation of the material. Answering a problem requires reflection from the entire audience. During the lecture, the students' thinking takes place with the help of the teacher's creation of a problem situation before they receive all the necessary information that constitutes new knowledge for them. In this way, students try to find a solution to a problem situation on their own.

Educational problems are accessible in their complexity for students, they take into account the cognitive capabilities of the students, proceed from the subject being studied and are significant for the assimilation of new material and the development of personality - general and professional.

A problem-based lecture ensures the creative assimilation of the principles and patterns of the studied science by future specialists, activates the educational and cognitive activity of students, their independent classroom and extracurricular work, the assimilation of knowledge and its application in practical classes.

Practical classes are focused on the most fundamental and problematic issues and are designed to stimulate the development of one's own position on these topics.

In working with students, a variety of means, forms and methods of teaching (information-developing, problem-searching) are used: the method of scientific

discussion, conference or round table, analysis of specific educational situations (case study).

Conference or Round Table

When using this method, it is possible to invite various specialists who are engaged in the study of the problem under consideration or work on the topic studied by students. These can be scientists, economists, artists, representatives of public organizations, government agencies, etc.

Before such a meeting, the teacher invites students to put forward a problem of interest to them on this topic and formulate questions for their discussion. If students find it difficult, the teacher can suggest a number of problems and, together with the students, choose the one that is more interesting for them. The selected questions are passed on to the invited specialist of the "round table" to prepare for the presentation and answers. At the same time, several specialists engaged in the study of this problem may be invited to the round table. In order for the round table to be active and engaged, it is necessary to encourage the audience to exchange views and maintain an atmosphere of free discussion.

With the use of all these forms of classes, students get real practice of formulating their point of view, comprehending the system of argumentation, i.e. turning information into knowledge, and knowledge into beliefs and views.

The collective form of interaction and communication teaches students to formulate thoughts in a professional language, to master oral speech, to listen, hear and understand others, and to conduct an argument correctly and reasonably. Teamwork requires not only individual responsibility and independence, but also self-organization of the team's work, demandingness, mutual responsibility and discipline. At such seminars, the subject and social qualities of a professional are formed, the goals of training and educating the personality of a future specialist are achieved.

The peculiarities of collective mental activity are that there is a rigid dependence of the activity of a particular student on a fellow student; it helps to solve the psychological problems of the team; there is a "transfer" of an action from one participant to another; Self-management skills are developed.

There are various forms of organizing and conducting this type of training, such **as a press conference.**

In the previous lesson, the teacher instructs students to individually answer the questions of the practical lesson and collectively discuss options for solving the same situation, which significantly deepens the experience of the trainees. Faced with a specific situation, the trainee must determine whether there is a problem in it, what it is, and determine his attitude to the situation. At the same time, each student should analyze the causes, course and results of the activities carried out by getting

used to the role of specific historical figures. The practical lesson begins with an introductory speech by the teacher, in which the problems for discussion are voiced. In the course of the discussion, each of the students has the opportunity to get acquainted with the options for the solution, listen to and weigh the many of their assessments, additions, changes, enter into a dialogue and discussion.

In the course of discussing the issues of the practical lesson, the analytical skills of the trainers develop, contribute to the correct use of the information at their disposal, develop independence and initiative in decisions.

At the final stage of the lesson, the teacher, correcting the conclusions based on the students' performances, makes general conclusions for each practical task and the overall result for the entire lesson.

Method of Scientific Discussion

The academic group is divided into two subgroups - generators and critics of ideas. There are three more people - expert analysts.

The practical lesson is implemented in four stages:

The first is preparatory (carried out 1-2 weeks before the practical lesson). The teacher instructs about the purpose, content, nature, and rules of participation in the game. Student training includes:

- determination of the purpose of the lesson, specification of the educational task;

- planning the general course of the lesson, determining the time of each stage of the lesson;

- development of criteria for evaluating the received proposals and ideas, which will allow you to purposefully and meaningfully analyze and summarize the results of the lesson.

Mutual criticism and evaluations are strictly forbidden, as they prevent the emergence of new ideas. It is necessary to refrain from actions and gestures that may be misinterpreted by other participants in the session. No matter how fantastic or improbable an idea put forward by any of the participants in the session, it should be met with approval. The more proposals are put forward, the more likely it is that a new and valuable idea will emerge.

Secondly, the lesson begins with the fact that the generators of ideas quickly and clearly characterize the ruler, the situation in the country and express all proposals for solving the named problem;

Third, critics of ideas "attack" - select the most valuable, progressive of them, analyze, evaluate, criticize and include in the list of relevant assumptions that provide a solution to the problem;

Fourth, experts analyze and evaluate the activities of both subgroups, the significance of the ideas put forward.

The goal of the teacher is to organize collective thinking activities to search for non-traditional ways to solve problems, when discussing controversial issues, hypotheses, problem or conflict situations.

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

For current control and intermediate certification, several oral interviews, test tests and colloquiums are conducted.

IX. MATERIAL AND TECHNICAL SUPPORT OF DISCIPLINE

The educational process in the discipline is carried out in lectures, computer classes of the building of the School of Biomedicine of the FEFU campus, equipped with computers and multimedia systems, with connection to the FEFU corporate network and the Internet, the Simulation Center of the FEFU School of Biomedicine.

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.

In order to provide special conditions for the education of people with disabilities and persons with disabilities at FEFU, all buildings are equipped with ramps, elevators, lifts, specialized places equipped with toilets, information and navigation support signs.

Name of Equipped Premises and Self-Study Rooms	List of Main Equipment
690922, Primorsky Krai, Vladivostok, Russky Island, Saperny Peninsula, Ajax village, 10, School of Biomedicine, room M 422, area 158.6 m²	Multimedia audience: Electric Screen 236*147cm Trim Screen Line; DLP projector, 3000 ANSI Lm, WXGA 1280x800, 2000:1 EW330U Mitsubishi; CP355AF Avervision visualizer, MP-HD718 Multipix camcorder; CORSA-2007 Tuarex Specialized Equipment Fastening Subsystem; Video Switching Subsystem: Audio Switching and Sound Reinforcement Subsystem: Power Amplifier, Wireless LAN Based on 802.11a/b/g/n 2x2 MIMO(2SS) Access Points.
690922, Primorsky Krai, Vladivostok, Russky Island, Saperny Peninsula, Ajax Village, 10, School of Biomedicine, aud. M 419, area 74.9 m²	Multimedia audience: Electric Screen 236*147cm Trim Screen Line; DLP projector, 3000 ANSI Lm, WXGA 1280x800, 2000:1 EW330U Mitsubishi; CP355AF Avervision visualizer, MP-HD718 Multipix camcorder; CORSA-2007 Tuarex Specialized Equipment Fastening Subsystem; Video Switching Subsystem: Audio Switching and Sound Reinforcement Subsystem: Power Amplifier, Wireless LAN Based on 802.11a/b/g/n 2x2 MIMO(2SS) Access Points.
690922, Primorsky Krai, Vladivostok, Russky Island,	Computer class for 22 workplaces: HP RgoOpe 400 All-in-One 19.5 (1600x900), Core i3-4150T, 4GB DDR3-1600 (1x4GB), 1TB HDD 7200 SATA, DVD+/-RW,

Saperny Peninsula, Ajax Village, 10, Oud. M612, area 47.2 m²	GigEth, Wi-Fi, VT, 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 collection (building A - level 10)	HP RgoOpe 400 All-in-One 19.5 (1600x900), Core i3-4150T, 4GB DDR3-1600 (1x4GB), 1TB HDD 7200 SATA, DVD+/-RW,GigEth,Wi-Fi,VT,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 displays and Braille printers; equipped with: portable devices for reading flat-printed texts, scanning and reading machines, a video magnifier with the ability to adjust color spectrums; magnifying electronic magnifiers and ultrasonic markers

ASSESSMENT FUND

WOS Passport

in the discipline "Problems of organizing medical and preventive care for the population"

Task type	Code and name of professional competence (result of mastering)	Code and name of the competency indicator
Organizational and managerial	PC-3 Ability to organize, plan and control the activities of a structural unit of a medical organization	PC-3.1 Knows Standards of Care PC-3.2 Is able to assess the resources of a medical organization and implement a quality management system PC-3.3 Possesses the necessary skills in the preparation of reporting documentation, assessment of the activities of a health care institution
Organizational and managerial	PC-5 Ability to assess the effectiveness of a medical organization, develop and select optimal management solutions, develop a business plan for the development of a medical organization, use a process approach in the management of a medical organization, use technological maps of the processes of a medical organization	PC-5.1 Knows the methods of planning a medical organization PC-5.2 Is able to draw up a plan for a medical organization, develop business planning and investment projects PC-5.3 Proficient in planning, development of business planning and investment projects

Code and name of the competency indicator	Name of the assessment indicator (the result of learning in the discipline)
PC-3.1 Knows Standards of Care	Knows the standards of medical care Knows how to provide first aid Proficient in first aid
PC-3.2 Is able to assess the resources of a medical organization and implement a quality management system	Knows the quality management system of a medical organization Is able to assess the resources of a medical organization and implement a quality management system Proficient in assessing the resources of a medical organization and implementing a quality management system
PC-3.3 Possesses the necessary skills in the preparation of reporting documentation, assessment of the activities of a health care institution	Knows the reporting documentation of the medical organization Is able to prepare reporting documentation for a medical organization Possesses the necessary skills for the preparation of reporting documentation, assessment of the activities of a health care institution
PC-5.1 Knows the methods of planning a medical organization	Knows the methods of planning a medical organization Able to plan the work of a medical organization
PC-5.2 Is able to draw up a plan for a medical organization, develop business planning and investment projects	Knows the rules for drawing up a plan for a medical organization, developing a business plan, an investment project Is able to draw up a plan for a medical organization, develop business planning and investment projects Possesses the skill of drawing up a plan for a medical organization, developing business and investment projects
PC-5.3 Proficient in planning, development of business planning and investment projects	Knows the principles of goal-setting, types and methods of organizational planning and fundamental concepts of financial management, as well as the method of process approach to the management of a medical organization Able to develop corporate, competitive and functional strategies for the development of the organization, develop investment projects and conduct their verification He is proficient in the methods of formulating and implementing strategies at the level of a business unit, developing and implementing marketing programs, as well as methods of investment analysis and analysis of financial markets, a process approach in the management of a medical organization and the possibility of using technological maps of the processes of a medical organization.

VI. MONITORING THE ACHIEVEMENT OF THE COURSE OBJECTIVES

Item No.	Supervised modules/sections/topics of the discipline	Codes and Stages of Competency Formation	Valuation Tools – Name	
			Current control	Intermediate Attestation

1	Section 1 Principles of organization of outpatient, inpatient, emergency, high-tech medical care	PC-3.1; PP-3.2; PP-3.3; PP-5.1; PC-5.2; PC-5.3	Knows	Interview UO-1, abstract PR-4	Credit Questions 1-26
			Can	Tests PR-1, essays PR-3, case problems PR-11, presentation	
			Owns	Work in small groups, UO-3	
2	Section 2. Organization of medical care in the system of childhood and obstetrics	PC-3.1; PP-3.2; PP-3.3; PP-5.1; PC-5.2; PC-5.3	Knows	Interview UO-1, abstract PR-4	Credit Questions 27-50
			Can	Tests PR-1, essays PR-3, case problems PR-11, presentation	
			Owns	Work in small groups, UO-3	

Scale for assessing the level of competence formation in the discipline "Problems of organizing medical and preventive care for the population"

Code and Competency Statement	**Stages of competence formation**		**criteria**	**Indicators**	**Points**
PC-3 Ability to organize, plan and control the activities of a structural unit of a medical organization	Knows (Threshold)	Fundamentals of planning, organization and implementation of the activities of a structural unit of a medical organization	Knowledge of the basics of planning and control of the activities of a structural unit of a medical organization	Ability to draw up the necessary documentation for planning and controlling the activities of a structural unit of a medical organization	61-70
	Can (Advanced)	analyze and evaluate the performance indicators of a structural unit of a medical organization	ability to analyze and evaluate the performance indicators of a structural unit of a medical organization	ability to substantiate the criteria for evaluating the organization, planning and control of the activities of a structural unit of a medical organization	71-84
	Proficient (High)	Skills Preparation of the justification of the volumes	methods of justifying the volume of medical care in a	ability to prepare the necessary calculations for the	85-100

		medical care in accordance with the necessary resources in the structural unit of the medical organization	structural unit of a medical organization	organization, planning and control of the activities of a structural unit of a medical organization	
PC-5 Ability to assess the effectiveness of a medical organization, develop and select optimal management solutions, develop a business plan for the development of a medical organization, use a process approach in the management of a medical organization, use technological maps of the processes of a medical organization	Knows (Threshold)	Principles of goal-setting, types and methods of organizational planning and fundamental concepts of financial management	Knowledge of the basic concepts of research processes, including business processes in medicine	Ability to explain the main stages of research of a business plan of a medical organization, a process approach in the management of a medical organization	61-70
	Can (Advanced)	develop corporate, competitive and functional strategies for the development of the organization, develop investment projects and conduct their verification	ability to analyze and compare the stages of the process of strategic development of a medical organization, business planning and the use of technological maps of the processes of medical activities	ability to develop investment projects and conduct their verification based on the use of a process approach in the management of a medical organization and the use of technological maps of the processes of medical activities	71-84

	Proficient (High)	methods of formulating and implementing strategies at the level of a business unit, developing and implementing marketing programs, as well as methods of investment analysis and analysis of financial markets.	methods of collecting, processing, analyzing information and their presentation for the implementation of business strategies of a medical organization using technological maps of medical activity processes	Ability to formulate the main stages and explain the tasks for the implementation of marketing programs and analysis of financial markets using the process approach in the management of a medical organization and the use of technological maps of the processes of medical activities	85-100

Methodological Recommendations Defining the Procedures for Assessing the Results of Mastering the Discipline

Current assessment of students. It is carried out in accordance with the local regulations of FEFU and is mandatory. It is carried out in the form of control measures: defense of a test work, interviews to assess the actual results of students' learning and is carried out by the leading teacher.

The objects of assessment are:

- academic discipline (activity in classes, timeliness of various types of tasks, attendance of all types of classes in the discipline being certified);

- the degree of assimilation of theoretical knowledge (survey);

- the level of mastery of practical skills and abilities in all types of educational work (colloquium);

- results of independent work.

Intermediate attestation of students.It is carried out in accordance with the local regulations of FEFU and is mandatory. It provides for the consideration of the results of all stages of the course. Upon successful completion of the two stages of the current certification, the student is given an intermediate certification (test, exam).

Test and examination materials. When assessing students' knowledge, the intermediate control takes into account the amount of knowledge, the quality of their assimilation, understanding of the logic of the academic discipline, and the place of each topic in the course. The ability to freely, competently, logically coherently present what has been studied, the ability to defend one's own point of view with arguments are evaluated.

I. Assessment Tools for Intermediate Attestation

Intermediate attestation includes the student's answer to the test questions.

Questions for the test

1. Basic principles of state policy in the field of public health protection.
2. Public health and health care as a science. History of development, methods, main sections.
3. Healthcare Management. Principles of management, management as a process, management cycle.
4. Legislative Framework of Primary Health Care in Russia.
5. Children's rights to health. Documents regulating the rights of children.
6. Rural medical outpatient clinic, organization of work, tasks and functions.
7. Central District Hospital. Its categories, structure, tasks and functions. Performance indicators.
8. City Hospital. Its structure, functions and tasks, organization of work. Performance indicators.
9. The Regional Hospital, Its Structure, Functions and Role in the Organization of Medical Care for the Rural Population.
10. Citizens' rights to health care. The rights of citizens to information about the state of their health (Constitution of the Russian Federation, Federal Law "On the Fundamentals of Public Health Protection in the Russian Federation").
11. Structure and functions of a maternity hospital with a women's consultation. Organization of work. Tasks and functions. Performance indicators of the antenatal clinic.
12. Protection of motherhood and childhood. Organizations that provide assistance to women and children. The rights of pregnant women and mothers to health care.
13. Medical and Social Problems of Women's Health Protection. Problems of abortion, gynecological morbidity, maternal mortality.
14. Evaluation of the performance of the antenatal clinic on the basis of performance.

15. Children's polyclinic, its structure. District Principle and Dispensary Method in the Work of Doctors of Children's Polyclinics. Performance indicators.

16. Performance indicators of the children's city polyclinic, their calculation and analysis.

17. Activities of the city polyclinic for the prevention of diseases. Health Promotion Centers and Healthy Lifestyle Offices, Their Functions.

18. Healthcare Human Resource Management.

19. Health Care Management Bodies, Their Task, Structure and Functions.

20. Organization of medical care for the urban population. United City Hospital, Structure, Management and Tasks.

21. The concept of health promotion and its role in public health.

22. Federal Law "On the Fundamentals of Public Health Protection"

23. Medical and social aspects of lifestyle. Risk factors. Medical activity of the population. Healthy lifestyle concept.

24. Guaranteed amount of free medical care.

25. Shop District Principle of Service for Workers and Employees of Industrial Enterprises, Construction and Transport. The main functions of a shop therapist.

26. World Health Organization, structure, main areas of activity.

27. Medical examination of permanent disability. Criteria for disability groups. Types of medical and social expert commissions, their composition and organization of work.

28. The concept of medical and social work. The role of the social worker in the health care delivery system.

29. Types of medical examinations. Organization and indicators.

30. Tuberculosis as a medical and social problem. The system of therapeutic and preventive measures to combat tuberculosis in the Russian Federation.

31. Record-keeping, reporting and analysis of morbidity and temporary disability. Main indicators of MTD.

32. Reporting documentation in healthcare organizations. Annual Report of the City Hospital, Main Sections and Contents.

33. Prevention of diseases, purpose, objectives, types, characteristics of each species.

34. Malignant neoplasms as a medical and social problem. Morbidity and mortality of the population with malignant neoplasms. Organization of oncological care.

35. Cardiovascular diseases as a medical and social problem. Organization of cardiology service in the Russian Federation.

36. The rights of citizens to appeal against the actions of medical workers and to refuse to receive medical care.

37. The role of non-governmental organizations in the promotion of a healthy lifestyle in the Russian Federation.

38. Features of the organization of medical and sanitary care for the rural population. Rural District Hospital, Its Structure and Functions. Prospects for the development of rural health care.

39. Rules for the issuance of certificates of incapacity for work in case of injuries.

40. The role, place and importance of health education in health care. Basic Principles, Methods and Means of Health Education.

41. Types of temporary disability. Procedure for issuing certificates of incapacity for work during pregnancy and childbirth, abortion, care for sick children.

42. Health Care Planning and Financing. Sources of funding for public health care.

43. Information and educational programs to promote a healthy lifestyle for the population in the Russian Federation, goals, objectives, implementation mechanisms.

44. Organization of Primary Health Care (PHC). General practitioner/family doctor in the primary health care system.

45. Disability morbidity rates. Methods of their calculation and analysis.

46. Management, purpose, objectives, role in the health care system.

47. The concept of rational pharmaceutical management.

48. Infant mortality. Structure of causes, dynamics of the indicator in the Republic of Kazakhstan. The main tasks of public health in the fight to reduce infant mortality.

Criteria for grading a student on a test in the discipline "Problems of organizing medical and preventive care for the population"

Assessment of the test	Requirements for the formed competencies
"Passed"	A grade of "passed" is given to a student if he/she knows the material well, presents it competently and to the point, without making significant inaccuracies in answering the question, correctly applies theoretical provisions in solving practical issues and problems, has the necessary skills and techniques for their implementation
"Not passed"	A "failed" grade is given to a student who does not know a significant part of the program material, makes significant mistakes, answers the questions with great difficulty. As a rule, a "failed" grade is given to students who cannot continue their studies without additional classes in the relevant discipline.

II. Assessment Tools for Ongoing Performance Appraisal

The control tests are intended for students studying the course "Problems of organizing medical and preventive care for the population".

When working with tests, you are asked to choose one answer option out of three or four proposed. At the same time, the complexity of the tests is not the same. Among the proposed tests, there are tests that contain several options for correct answers. The student needs to provide all the correct answers.

The tests are designed for both individual and collective solutions. They can be used in the process of both classroom classes and independent work. The selection of tests necessary for the control of knowledge in the process of intermediate certification is made by each teacher individually.

The results of the test tasks are evaluated by the teacher on a five-point scale for attestation or according to the "pass" - "fail" system. An "excellent" grade is given if you answer more than 90% of the tests offered by the teacher. A "good" score is given if you answer correctly on more than 70% of the tests. The grade is "satisfactory" – with a correct answer to 50% of the proposed tests.

Sample test tasks

1 Factors influencing the health of the population are;

A – genetic

B – natural and climatic

B – standard of living and lifestyle of the population

D – level, quality and accessibility of medical care

D – all of the above

2 The preferred way of health care development at the present stage is:

A – state system

B – mixed system

B – Insurance Medicine

D – Private Practice

3. Financing of medical organizations in the system of compulsory medical insurance shall be carried out through all the listed structures, except:

A – Insurance Medical Organizations

B – branches of the territorial funds of compulsory medical insurance

B – health management bodies

4. The program of state guarantees for the provision of free medical care to citizens shall contain:

A – list of relevant types of medical care

B – Scope of Medical Care

B – Basic Compulsory Health Insurance Program

D – per capita standard of health care financing

D – all of the above

5. Indicate the highest priority direction of structural transformations in healthcare:

A – development of primary health care

B – development of a network of dispensaries

B – increasing the role of hospitals

D – increasing the role of sanatorium and spa care

6. Medical ethics is

A is a specific manifestation of general ethics in the doctor's activity

B is a science that deals with the issues of medical humanism, the problems of duty, honor, conscience and dignity of medical workers

B is a science that helps to develop a doctor's ability to morally orient himself in difficult situations that require high moral, business, and social qualities

D – All of the above is true

D – No Right Option

7. Medical deontology is

A is an independent science of the duty of medical professionals

B – applied, normative, practical part of medical ethics

B – Both are true

8. What are the relationships between the norms and principles of medical ethics and deontology?

A – doctor-patient relationship

B – Relationship between the doctor and the patient's relatives

B – relationships in the medical team

D – Relationship between health professionals and society

D – all of the above

9. Is the informed consent of the patient (or trusted persons) a necessary precondition for medical intervention?

A – yes

B – no

B – sometimes

10. The first Russian medical scientist to receive the Nobel Prize:

A **–** N. I. Pirogov

B **– I** . I. Mechnikov

V – I. P. Pavlov

11. The concept of a legal entity shall include:

A – whether the MU has property

B – the right of operative management of segregated property

B – availability of an independent balance sheet or estimate for the MU

D – of the Charter

D – all of the above

12. A general practitioner (family doctor) is:

A is a specialist with higher medical education who has entered into an agreement with a legal entity for the provision of medical care to the population

B is a specialist with a higher medical education, who has special training in providing medical and social assistance to the family

13. The attending physician is:

A is a doctor with a medical degree and a specialist certificate

B – a doctor working in a medical institution

B – a doctor who provides medical care to a patient during the period of observation and treatment in an outpatient or hospital institution

D – medical and social care provider

14. **In case of violation of his/her rights in the field of health care, the patient may apply to:**

A – Health Authority

B – Professional Medical Association

B – Department of Rospotrebnadzor

D – SMO or TFOMS

D – court

E – all of the above is true

15. **Do medical personnel have the right to carry out euthanasia?**

A – yes

B – no

B – in some cases, at the request of the patient or his/her legal representative

D – in some cases, at the request of relatives with the permission of the health authorities

16. Minors have the right to voluntary informed consent or refusal of medical intervention with:

A – 14 years old

B – 15 years

B – 16 years old

D – 18 years old

17. **Primary health care includes:**

A – prevention and treatment of the most common diseases in polyclinics and hospitals

B – prevention and treatment of diseases, injuries and poisoning in a polyclinic

B – treatment of the most common diseases, injuries, poisoning, and other emergency conditions.

D – All of the above is true

18. For disclosure of medical confidentiality, medical workers and persons to whom information constituting medical secrecy has been transferred in accordance with the procedure established by law shall be charged:

A – administrative, criminal, civil liability

B – administrative and criminal liability

B – disciplinary, administrative, or criminal liability

D – disciplinary and administrative liability

19. An employment contract may be concluded for: (all but one is true)

A – indefinite period

B – a fixed term of no more than 5 years (fixed-term contract)

B – if the term of validity of the AP is not specified, then the AP is considered to be concluded for an indefinite period

D is the period of probation for employment

20. **Temporary transfer of an employee to another job without his/her consent is possible:**

A – in case of production necessity

B – due to changes in the terms and conditions of the AP

B – in connection with violation of labor discipline

D – in case of imposition of a disciplinary sanction

21. An employment contract shall enter into force on the date of:

A – it must be signed by the employee and the employer

B – actual admission of the employee to work with the knowledge or on behalf of the employer or his representative

B – its signing by the employee and the employer and execution of the order

D – actual performance of labor duties by the employee

22. For committing a disciplinary offence, the employer has the right to apply the following disciplinary sanctions to the employee: (all but one is true)

A – remark

B – reprimand

B – severe reprimand

D – Dismissal

23. Health insurance is

A – payment for medical services through an insurance company

B is a form of social protection of the interests of the population in the field of health care

B – payment for treatment and medicines at the expense of accumulated funds

D – medical care of the population at the expense of the insurance organization

24. **The means of compulsory health insurance in the region are formed at the expense of the following: (all but one is true)**

A – funds of the local administration

B – funds of state-owned enterprises and institutions

B – funds of private and commercial enterprises and institutions

D – Citizens' Funds

25 .**The legal basis for compulsory health insurance is the following documents: (all but one is true)**

A – Law of the Russian Federation "On Compulsory Medical Insurance in the Russian Federation"

B – Additions and Amendments to the Law "On Compulsory Medical Insurance in the Russian Federation"

B – Law "On Sanitary and Epidemiological Well-Being of the Population"

D – Fundamentals of Legislation on Public Health Protection

26. The main task of insurance organizations in the implementation of the system

Compulsory health insurance is:

A – payment for medical services of the Ministry of Defense, quality control of medical care

B – financing of other functions of the Ministry of Defense

B – financing of anti-epidemic measures in the territory

D – creation of insurance reserves in accordance with the established procedure

27. The basis for the formation of a territorial program of state guarantees is as follows: (all but one is true)

A – the basic program of compulsory medical insurance

B – the size and composition of the population of the territory

B – the list of medical institutions participating in the compulsory medical insurance

D – indicators of the volume of medical care to the population

D – the amount of financial resources

E – the volume of paid medical services

28. **The insurer of the non-working population in the compulsory medical insurance system is**

A – Local Administration

B – Social Protection Authority

B – medical insurance organization

D – medical institution

29. **Insurers for compulsory medical insurance can be: (all but one is true)**

A – territorial funds of compulsory medical insurance

B – Medical Insurance Organizations

B – branches of territorial funds of compulsory medical insurance

D – administration of enterprises and institutions

30. Licensing of a medical institution is

A – determination of the compliance of the quality of medical care Established Standards

B – issuance of a state permit to carry out certain types of activities

B – procedure for granting the status of a legal entity to a medical institution

31. The following shall be subject to compulsory health insurance:

A – children

B – Disabled

B – non-working population

D – the entire population

D – working population

32. **The object of health insurance is:**

A is a sick person

B – all healthy population

B – insurance risk associated with the costs of providing medical care in the event of an insured event

D – insured event

33. **Define management as the science of management**

A – management – the ability to manage material resources in order to achieve an effective end result.

B – management – the art of managing intellectual, financial, raw materials, material resources for the purpose of the most efficient production activity.

B – management is the art of managing financial resources in order to achieve the most efficient production activities.

D – management is a form of organization of the team's work aimed at achieving the set goal.

34. Population registers do not provide a solution to this problem

A – storage of the police card index to obtain data at the request of specialists

B – formation of state reporting

B – accounting and analysis of the material and technical base of health care

D – effective implementation of dispensary observation

D – assessment of long-term treatment outcomes

35. When studying the total morbidity, the unit of observation is taken as (choose the correct answer)

A is the first visit to the clinic for this disease in the current year or detected by a doctor when calling him at home

B – each patient's request for a specific disease

B – each disease detected during a medical examination

D is a set of diseases identified during medical care and medical examinations

36. Can it be said that the difference between the two indicators of general disability is statistically significant if T = 0.9?

A – yes

B – no

B – yes, but with a small number of observations

D – yes, but with a large number of observations

D – additional research is required

37. **A disease that the patient has been suffering from for a number of years and annually consults a doctor at the polyclinic will be included in the statistics**

A – primary morbidity

B – general morbidity

B – pathological lesion

38. **In the study of general morbidity (according to the data of outpatient clinics), the following methods are used:**

A – Outpatient Ticket

B – Register of Infectious Diseases in the Moscow Region and the Center for Hygiene and Epidemiology

B – personal card of the employee

D – Summary Record of Diseases by Month, Doctor, Department

39. **Specify a single regulatory document for statistical developments of hospitalized morbidity**

A – there is no such document

B – International Classification of Diseases, Injuries and Causes of Death

B – statistical card of a person discharged from the hospital, form No. 066/y

D - sheet of registration of the movement of patients and the bed fund of the hospital, f.No007/y

D – summary record of the movement of patients and beds by hospital, department or bed profile, form No. 016/y

40. Information on hospitalization morbidity allows us to judge (all but one is true)

A – timeliness of hospitalization

B – the nature and extent of hospital medical care provided

B – duration of treatment

D – prevalence of diseases

D – outcomes of treatment in hospitals

41.Indicate what is the unit of observation in the study of primary disability

A – the case of the person's disability for the first time in the current year

B – each visit of a disabled patient to a doctor in a polyclinic

B – each case of referral for illness

D – All of the above is true

42. In what indicators should the results of the study be presented when studying the composition of hospitalized patients by hospital departments?

A – extensive

B – Intensive

43. Indicate the indicators in which the results of the study should be presented when studying the prevalence of hypertension in people of different ages

A – intensive

B – extensive

B – Ratios

D - Visibility

44. Which of the following indicators is not a component of infant mortality?

A – perinatal mortality

B – early neonatal mortality

B – late neonatal mortality

D – neonatal mortality

D – post-neonatal mortality.

45. Indicate the age-related structural components of perinatal mortality (all except):

A – stillbirth;

B – early neonatal mortality;

B – neonatal mortality.

46. What is late neonatal mortality?

A – infant mortality in the period 7 to 28 days

B – infant mortality in the second week of life

B – mortality of children over 1 month of age.

47. What documents must health care institutions submit to the Civil Registry Office to register the death of a child?

1 – Perinatal Death Certificate

2 – Death certificate

3 – Paramedic's certificate

4 – medical history

5 – Post-mortem (forensic) autopsy report

A – all of the above is true

B – 1, 2, 3

B – true 2, 3, 4.

48. What are the differences between mortality and mortality rates?

1 – none

2 – mortality – in %, mortality – in %o

3 – Mortality – Hospital Indicator

4 – mortality rate – territorial indicator

A – true 2, 3, 4

B – True 1

B – True 2.

49. What are the main indicators on which the average life expectancy depends:

A – from fertility rates

B – mortality rates in each age group

Q – Both answers are correct

D – from other indicators.

50. Knowledge of demographic data is necessary for (all but one thing is true):

A – Status of Health Care Development Plans

B – assessment of the health of the population and the effectiveness of health improvement measures

B – Calculations of Population Health Indicators

D – for licensing of medical organizations.

51. Special (private) fertility rates include:

1 – total fertility rate;

2 is an indicator of total fecundity;

3 – age-specific fertility rates;

4 – marital birth rate;

5 – reproduction coefficient – gross (net coefficient);

A – true 2, 3, 4, 5;

B – true 1, 2, 3;

B – true 1, 3, 4;

D – true 1, 2, 3, 4, 5;

52. **Indicate the attribute indicated by the letters that distinguish the polyclinics marked with numbers**

A – by profile

B – on a territorial basis

B – organization system

D – by form of ownership

1 – Combined

2 – Uncombined

3 – urban

4 – Rural

5 – Resort

6 – serving adults and children

7 – serving the adult population

53. The main ways of developing outpatient care for the adult population in the new economic conditions are all but one

A – strengthening and development of forms and methods of restorative treatment and rehabilitation

B – providing the opportunity to choose a district or family doctor

B – development of general medical practices

D – creation of consultative and rehabilitation centers on the basis of polyclinics

D – development of modern technologies and new organizational forms of outpatient care

E – increasing the number of district doctors and disaggregating the districts

54. **Indicators of the effectiveness and quality of medical examination can be as follows**

A is an indicator of the frequency of exacerbation, systematic follow-up

B is an indicator of the frequency of treatment and preventive measures

B – transition of patients on DN from one observation group to another

D is the average number of days of hospitalization

55. The length of the working day is established by labour legislation and is the following for doctors:

A – 5 hours

B – 6.5 hours

B – 7 hours

D – 7.5 hours

56. **The doctor on duty performs functions other than one**

A – accepts and provides assistance to admitted patients

B – supervises seriously ill patients

B – consults patients in the emergency department

D – issues death certificates of the patient

57. Ways to Improve the Quality of Inpatient Care (All but One)

A – quality control of inpatient care

B – compliance with the stages of the treatment and diagnostic process

B – the reasonableness of the patient's referral to the hospital

D – referral of the patient to the specialized department of the hospital

D – total hospitalization of patients

58. **What indicators characterizing the activity of the hospital are referred to as volume indicators?**

1 – provision of the population with beds

2 – hospitalization rate

3 – average annual bed occupancy

4 is the average length of stay of the patient in the bed

5 – bed rotation

6 – coincidence of clinical and pathological diagnoses

7 – postoperative complications

8 – in-hospital mortality

9 – Staffing of doctors

A – all of the above is true

B – 6,7,8

B – 1,2,3,4,5,9

G – 3,4,5,7,8

59. In case of decrease in the average duration of the patient's stay on the bed, the occupancy of the therapeutic bed

A – will increase

B – will decrease

B – will not change, since this indicator and the average length of stay of the patient in the bed are not related to each other

D – depending on the profile of the patients, the bed occupancy can remain unchanged or change in both directions

60. **The average length of stay in a bed is affected by (all but one is true**)

A – severity of the course of the disease

B – late diagnosis of the disease

B – unpreparedness of patients in the clinic for planned hospitalization

D – method of hospitalization of patients

61. Economic damage to health care depends on:

A – bed turnover

B – insufficient bed occupancy

B – average bed-day

D – lethality

62. The capital-to-labor ratio of personnel is

A is the ratio of the value of the active part of fixed assets for the year to the average annual number of employees

B is the ratio of the cost of fixed assets to the average annual number of employees

B – both

D – neither.

63. The fixed asset renewal rate is

A is the ratio of the value of fixed assets commissioned for the year to the value of fixed assets at the end of the year

B is the ratio of the value of fixed assets commissioned for the year to the value of fixed assets at the beginning of the year

B – both

D – neither.

64. In what units of measurement is the indicator of the volume of activity of the NSR expressed?

A – in the number of calls per 1 doctor

B – in the number of calls per 1 person per year

B – in the number of calls per 1 vehicle

65. When should patients with acute pathology be hospitalized?

A – 10 hours from the moment of illness

B – the first day from the moment of illness

B – 6 hours from the moment of illness

D – 2 hours from the moment of illness

66. A rural medical district unites: (all but one is true)

A – district hospital (medical outpatient clinic)

B – feldsher-obstetric stations

B – kolkhoz maternity hospitals

D – Kindergartens

D – paramedic health posts at enterprises

E – dispensaries

Ж – a sanatorium located on the territory of a rural settlement

67. The functions of a medical and obstetric station include: (all but one is true)

A – provision of pre-hospital medical care to the population

B – assessment of the quality of medical examination of the population

B – implementation of measures to reduce morbidity and mortality of the population

D – improving the sanitary and hygienic culture of the population

68. The tasks of the regional hospital include: (all but one is true)

A – provision of the population of the region in full
highly specialized, qualified, consultative, outpatient and inpatient care

B – provision of organizational and methodological assistance to medical Institutions of the region

B – provision of emergency and planned medical care

D – organization of sanitary and anti-epidemic measures in the region

69. The subjects of in-house quality control are (everything is correct, except)

A – Head of Department

B – Deputy Chief Physician for Clinical and Expert Work

B – Chief Specialist of the District

D is an expert of an insurance medical organization

70. Outcome Models (RCMs) include all indicators except

A – Performance Indicators

B – Performance Indicators

B – defect rates

71. The system of departmental control over the quality of medical care includes the following elements (all but one is true)

A – assessment of human and material and technical resources and examination of the process of providing medical care to specific patients and study of their satisfaction

B – calculation and analysis of indicators characterizing the quality and effectiveness of medical care, identification and justification of defects, medical errors, preparation of recommendations for their elimination

B – selection of the most rational management decisions and control over their implementation

D – protection of the patient's rights to receive medical care of the required volume and quality

72. On what day of the patient's stay in the hospital should he/she be issued a certificate of incapacity for work and by whom?

A – on any day of stay in the hospital, signed by the attending physician and the head of the department

B – on any day of stay in the hospital, signed by the attending physician, the head of the department and the chief physician

B – when a patient is discharged from the hospital or at his/her request to be presented at the place of work to receive benefits, it is signed by the attending physician and the head of the department.

73. Specify the terms of referral of patients (except tuberculosis) for medical and social examination:

A – no later than 4 months in case of obvious unfavorable clinical and occupational prognosis

B – no later than 10 months in case of a favorable occupational and clinical prognosis

B – regardless of the period of time, working disabled persons in case of deterioration of clinical and labor prognosis

D – All of the above is true

D – There is no correct answer.

74. What is the maximum period for which the VC can extend a certificate of incapacity for work?

A – up to 2 months

B – up to 3 months

B – up to 6 months

D – up to 10 months

D – up to 4 months.

75. At **what stage of pregnancy is a certificate of incapacity for work issued?**

A – from the 26th week of pregnancy

B – from the 30th week of pregnancy

B – from the 32nd week of pregnancy

D – from the 29th week of pregnancy

76. Who pays for mandatory and periodic examinations of persons working in occupational hazards?

A – medical insurance organizations

B – Local Administration

B – Health Care Management Body

D – employers of these institutions

77. Establish a match:

Optimal distribution of the bed capacity depending on the intensity of the treatment and diagnostic process (LDP)

LDP Intensity Proportion of beds

A – intensive 1. 15%

b – rehabilitative treatment

c – long-term treatment of patients 2. 20%

Chronic diseases

d – medical and social assistance 3. 45%

A – true a – 2, b – 3, c – 2, d – 1

B – true a –3, b –2, c –1, d –2

78. Define the following representatives:

A – License Applicant

B – Licensee

B – Licensing Authority

1 – a legal entity or an individual entrepreneur who has applied to the licensed authority for a license to carry out a specific type of activity

2 – Federal executive authorities, executive bodies of the constituent entities of the Russian Federation that carry out licensing in accordance with the Federal Law

3 – a legal entity or an individual entrepreneur who has a license to carry out a specific type of activity

79. **Define the following categories**

A – Warning

B – Suspension of License

B – revocation of license

D – revocation of license

1 – deprivation of the licensee's right to engage in activities subject to licensing until a new license is obtained

2 – temporary deprivation of the licensee's right to carry out the licensed type of activity

3 – Recognition of the license as invalid from the moment of its issuance

4 – official written order of the licensing authorities to eliminate the violations committed

80. **Describe the leadership style if the manager usually makes decisions alone; the activities of subordinates are strictly regulated; the initiative of subordinates is not approved:**

A – liberal

B – Authoritarian

B – democratic

81. Indicate which indicators indicated by letters characterize the areas of analysis of fixed assets indicated by numbers:

A – return on capital for the medical institution (in physical or value terms);

B – capital-labor ratio of personnel;

B is the refresh rate.

1 – analysis of the structure of movements and the state of fixed assets;

2 – analysis of the provision of fixed assets;

3 – analysis of the efficiency of the use of fixed assets.

82.Specify the sequence of calculations in the step-by-step method of determining costs.

1 – Define the Base Cost Unit

2 – Calculation of costs by hospital units

3 – redistribution of the costs of the auxiliary units of the institution to the main divisions

4 – Determining the cost of the service

A – 2, 1, 3, 4

B – 1, 3, 2, 4

B – 1, 2, 3, 4

83.**Specify the sequence of actions for the implementation of paid medical services in a healthcare institution.**

1 – Determination of types of paid services

2 – study of the material and technical base of the institution

3 – Determination of the factors that make it possible to introduce paid services in health care facilities

4 – calculation of the cost of medical services

5 – informing the population about the list, cost and types of paid services

A – 1, 2, 3, 4, 5

B – 2, 3, 1, 4, 5

B – 5,1,3,2,4

84. Classify: which methods of outpatient care indicated by numbers belong to retrospective (A) and prospective (B)

1 – payment for the actual number of detailed services

2 – payment for the actual number of visits

3 – Payment for the actual number of end cases of outpatient care

4 – payment on the basis of the per capita standard for each treated person (partial fund holding, full fund holding)

85. Classify which inpatient payment methods indicated by numbers are retrospective (A) and prospective (B)

1 – for the actual number of bed-days

2 – for the actual number of completed treatment cases

3 – for the planned and agreed volumes and structure of inpatient care

86. What are the priorities that should be addressed by the chosen methods of payment for health care?

1 – Ensuring resource conservation

2 – attraction of patient flows (consumers of services)

3 – Cost predictability

4 – increasing the duration of the cost of treatment

5 – all of the above

A – 1, 2, 3

B – 1, 2, 4

B – 5

D – 1, 3

87. For each of the scenarios (indicated by numbers), select the appropriate type of marketing research of the situation (indicated by a letter):

1 – when a new drug is placed on the pharmaceutical market

2 – when introducing a new effective, but expensive diagnostic method

3 – if it is necessary to study the impact of pricing policy on the consumption of medical services

Types of Market Research:

A – descriptive

B – Search

B – Experimental

88. You enter the market with operations in the field of cosmetic surgery. How do you plan to achieve commercial success?

A – you just need to set prices lower than those of competitors and there will be no end to customers

B – you need to buy as much (and, therefore, cheaper) advertising time in the media as possible and attract customers 24 hours a day

The main thing is to start working as soon as possible, and then everything will work out

D – to conduct a survey among those who have already resorted to the services of cosmetology surgery and, depending on the degree of prosperity of most of them, either to focus on reducing the cost of the process or on increasing comfort

D – to conduct a survey of the population through the media on the topic "What from the arsenal of cosmetic surgery attracts me? Why haven't I used cosmetology surgery yet?"

E – I will try, based on financial capabilities, to combine D and M

89. Indicate the indicators in which the results of the study should be presented when examining the prevalence of hypertension in persons of different ages

A – intensive

B – extensive

B – Ratios

D – Visibility

90. Indicate the correct sequence of the methodology for analyzing the activities of the polyclinic in the context of budgetary and insurance medicine

1. – Quality of medical diagnostics and treatment of patients

2. – carrying out preventive work and its results

3. – organization of the work of the polyclinic

4. – general information about the polyclinic

5. – continuity of the work of the polyclinic and the hospital

A – 1, 2, 3, 4, 5

B – 4, 3, 2, 1, 5.

91. Which of the following indicators characterizing the activity of the hospital are referred to as volume indicators?

1. – provision of the population with beds

2. – Hospitalization rate

3. – average annual bed occupancy

4. – the average length of stay of the patient in the bed

5. – Bed turnover

6. – coincidence of clinical and pathological diagnoses

7. – postoperative complications

8. – In-hospital mortality

9. – Staffing of doctors

A- All of the above is true

B – 6, 7, 8

B – 1, 2, 3, 4, 5, 9.

92. Indicate the correct sequence of the methodology for analyzing the activities of the hospital in the context of budgetary and insurance medicine

1. – general information about the hospital

2. – continuity of the work of the hospital and the polyclinic

3. – organization of the work of the hospital

4. – Quality of medical diagnostics

5. – Quality of treatment of patients

A – 1, 2, 3, 4, 5

B – 1, 3, 4, 5, 2.

93. Specify the Correct Sequence of the Market Research Scheme

1. – Selection of sources of information

2. – Collection of information

3. – Identification of problems and formulation of research goals

4. – Presentation of the results obtained

5. – Analysis of the collected information

A – 3,1,2,5,4

B – 1,2,3,4,5.

94. Indicate the sequence of the methodology for calculating standardized indicators by the direct method

1. – Choice of standard

2. – Calculation of "expected numbers"

3. – Calculation of group-by-group intensive indicators

4. – Distribution in standard

5 – Obtaining an Overall Intensive Standardized Measure

A – 3,1,4,2,5

B – 1,2,3,4,5

95. Select the main signs by which it is possible to analyze the incidence by referral on the basis of the outpatient voucher

1 – age and sex characteristics

2 – contingent (employed, non-working)

3 – detection of diseases when seeking medical care and during preventive examinations

4 – Characteristics of Completed Outpatient Care Cases

5 – incidence of VUT among those who seek medical care

6 – all of the above

A – if 1, 2, 3 are true

B – if 2, 3, 4 are true

B – if 1, 2, 4 are true

D – if 2, 4, 5 are true

D – if 6 is true

96. Indicate which structural unit of the polyclinic, indicated by letters, includes the rooms marked with numbers

A – Prevention Departments

B – Treatment and Prevention Unit

B – Auxiliary Diagnostic Unit

D – Department of Rehabilitation Treatment

1 – Endoscopic

2 – cardiology

3 – acupuncture

4 – anamnestic

5 – mechanotherapy

6 – pre-hospital reception room

97. Establish the correspondence of the types of disability indicated by the letters A and B to the conditions indicated by the numbers

A – temporary;

B – persistent;

1. – a condition in which the patient is forced to stop working;

2. – a condition in which the impaired functions of the organism that impede work are temporary, reversible;

3. – a condition in which the impaired functions of the body, despite the complexity of treatment, have become persistent, irreversible or partially reversible.

98. **A student of the medical institute during his internship went to the doctor for acute bronchitis. What document should be issued by a doctor?**

A – certificate of the established form

B – certificate of incapacity for work

B – no document.

99. The mother shall be on partially paid leave until 19.12, and on 15.12 she shall take the child to the paediatrician. Diagnosis of acute respiratory viral infections. What kind of care document will be issued to the mother?

A – sick leave from 15.12 until the child recovers

B – no document

B – sick leave certificate from 20.12.

100. The patient was issued a certificate of incapacity for work from 18.12 to 27.12 with an appointment on 27.12. The patient appeared only on 5.13 (he was out of town on his own initiative). On examination, the progression of the process was established. How should a sick leave certificate be issued?

A – extended from 28.12 with the indication "violation of the regime"

B – extended from 5.13

B – new one opened from 5.13

D – extended from 5.13 with the indication "violation of the regime" from 27.12.

Sample answers to test tasks

1-D
2-B
3-B
4-D
5-A
6-G
7-B
8-D
9-A
10-B
11-D
12-B
13-B
14TH
15-B
16-B
17-B
18-B
19-G
20-A
21-A
22-B
23-B
24-G
25-B
26-A
27TH
28-A
29-G
30-B
31-G
32-D
33-B
34-B
35-A
36-B
37-B
38-A
39-B
40-G
41-A
42-A
51-A
52-A-5.6.7, B-3.4, B-1.2
53RD
54-A
55-B
56-G
57-D
58-B
59-A
60-G
61-B
62-B
63-A
64-B
65-B
66-ZH
67-B
68-G
69-G
70-B
71-G
72-B
73-G
74-G
75-B
76-G
77-A
78-A-1.B-3.B-2
79-A-4.B-2.B-1.G-3
80-B
81-A-3.B-2.B-1
82-A
83-B
84-A-1.2.3, B-3
85-A-1.2,B-3
86-G
87-A-3,B-1,B-2
88-B
89-A
90-B
91-B
92-B

43-A
44-A
45-B
46-B
47-B
48-A
49-B
50-G

93-A
94-A
95-D
96-A-4.6,B-2,B-1,G-3.5
97-A-2, B-3
98-A
99-B
100-G

Test Evaluation Criteria

Assessment is carried out in an e-learning session on a hundred-point scale.

The test includes 100 tasks, the maximum test score is 100.

Within the framework of the current level of knowledge assimilation in the discipline, a test result of at least 61 points is allowed.