

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

Far Eastern Federal University

(FEFU)

INSTITUTE (SCHOOL) OF LIFE SCIENCES AND BIOMEDICINE (SCHOOL)



Director of the Department of Pharmacy and Pharmacology

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

CLAIM

WORK PROGRAM OF THE DISCIPLINE Research Workshop: Comparative Analysis of Health Systems Area of study 32.04.01 Public Health Master's program "Leadership and governance in public health (program in English for foreign citizens)" Form of training: full-time

Course 1 semester 2 lectures - one hour. Practical training 18 hours The total number of classroom hours is 18 hours. Self-study 90 hours. Credit with a grade of 2 semester

The work program is drawn up in accordance with the requirements of the Federal State Educational Standard for the field of training 32.04.01 Public Health, approved by the order of the Ministry of Education and Science of the Russian Federation dated 31.05.2017 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

Back of the title page of the RPD

 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. No_____

3. 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. № _____

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. No_____

5. 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. № ____

1. Goals and objectives of mastering the discipline:

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

The objectives of the research seminar are:

1. Study of the current legislation of the Russian Federation, international norms of law in the field of medicine.

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

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

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-6 Ability to develop plans and programs, form a system of indicators for the activities of a medical organization, assess the effectiveness of the activities of a medical organization, develop options for management decisions and assess the risks associated with their implementation	PC-6.1 Knows the peculiarities of the formation of the system of indicators of a medical organization PC-6.2 Is able to assess the effectiveness of the activities of a medical organization, taking into account the formed system of indicators PC-6.3 Possesses the skills of forming performance indicators, assessing their effectiveness, as well as the ability to develop management decisions with an assessment of the risks associated with their implementation

Professional competencies of graduates and indicators of their achievement:

Code and name of the competency	Name of the assessment indicator
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	Knows the quality management system of a medical
a medical organization and implement	organization
a quality management system	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	Knows the reporting documentation of the medical organization
in the preparation of reporting	Is able to prepare reporting documentation for a medical
documentation, assessment of the	organization
activities of a health care institution	Possesses the necessary skills for the preparation of reporting
	documentation, assessment of the activities of a health care
	institution
PC-6.1 Knows the peculiarities of the	Knows the specifics of the formation of the system of indicators
formation of the system of indicators of	of a medical organization
a medical organization	Able to form and fulfill the indicators of a medical organization Possesses the skill of forming and fulfilling the indicators of a
	medical organization
PC-6.2 Is able to assess the	Knows the main performance indicators of a medical
effectiveness of the activities of a	organization
medical organization, taking into	Is able to assess the effectiveness of a medical organization,
account the formed system of	taking into account the formed system of indicators
indicators	Possesses the skill of assessing the effectiveness of the activities
	of a medical organization, taking into account the formed
	system of indicators
PC-6.3 Possesses the skills of forming	Knows the main performance indicators of a medical
performance indicators, assessing their	organization
effectiveness, as well as the ability to	Is able to generate performance indicators, assess their
develop management decisions with	effectiveness, and assess the risks associated with their
an assessment of the risks associated	implementation
with their implementation	Possesses the skills of forming performance indicators,
	assessing their effectiveness, as well as the ability to develop
	management decisions with an assessment of the risks
	associated with their implementation

I. Labor intensity of the discipline and types of training in the discipline The total labor intensity of the discipline is 3 credits (108 academic hours).

Designation	Types of Study Sessions and Student Work	
Ave	Practical exercises	
Pr electr.		
WED:	Student's independent work during the period of theoretical training	
Including	Independent work of the student and contact work of the student with the teacher	
control	during the period of intermediate certification	
	And other types of work	

Structure of the discipline:

Form of study – full-time

	Form of study – fun-ti		Nun	nber of l and w		y type the stu		ining	E f	
№	N₀ Section Name Discipline Discipline	Discipline me	Se me ster	Lek	Lab	Av e	ОК	WE D	Cont rol	Forms of intermediate attestation
	Topic 1. General characteristics of the health care system as a system	2			4		12			
	Topic 2. Healthcare in the Russian Federation. The system of public health protection in the Russian Federation	2			2		12			
	Topic 3. U.S. Health Care System	2			2		12			
	Topic 4. Canada's Health System	2			2		12			
	Topic 5. Cuba's health care system	2			2		12			
	Topic 6. UK Healthcare System	2			2		10			
	Topic 7. Healthcare systems in China and North Korea	2			2		10			
	Topic 8. Japan's Healthcare System	2			2		10			
	Total:	2	-	-	18	-	90		For example, if you want to be a member of the Board	

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

Lectures are not included in the curriculum.

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

Practical exercises (18 hours)

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

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

Topic 2. Healthcare in the Russian Federation. The System of Public Health Protection in the Russian Federation (2 hours)

- 1. Healthcare in the Russian Federation.
- 2. The system of public health protection in the Russian Federation.

Topic 3. U.S. Health System (2 hours)

- 1. Structure of the U.S. health care system.
- 2. Government programs.
- 3. U.S. Physicians.
- 4. Medical expenses.
- 5. Medical insurance.
- 6. U.S. Health Care Reform.

Topic 4. Canada Health System (2 hours)

- 1. History.
- 2. Structure of the medical service.
- 3. Private medicine.
- 4. Rationing and control in health care.
- 5. Medical personnel.
- 6. Financing and payment system.

Topic 5. Cuba's Health System (2 hours)

- 1. The Cuban healthcare system is the best in the world.
- 2. Institute of Family Physicians.
- 3. Medical education in Cuba.
- 4. Preventive orientation of Cuban medicine.
- 5. Problems of health care in Cuba.
- 6. Prerequisites for the benefits of the Cuban model of health care.

Topic 6. UK Healthcare System (2 hours)

- 1. History.
- 2. Structure of the medical service.
- 3. Private medicine.

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

Russia.

Topic 7. Healthcare System of China and North Korea (2 hours)

- 1. China's healthcare system.
- 2. North Korea's health care system.

Topic 8. Japan's Health System (2 hours)

- 1. Insurance system in Japan.
- 2. Features of the Japanese health care system.
- 3. Japan's Health Care and Technological Progress.

Self-paced work

Self-study questions:

1. Healthcare in the Russian Federation.

2. U.S. health care system. Structure of the health care system. Government programs. Medicare. Tricare. Medical education in the USA. Medical expenses. Health insurance. U.S. health care reform.

3. Canada's health care system. The Canadian Health Act prohibits the provision of fee-for-service health services except for those that are not provided for in provincial health plans.

4. Cuba's health care system. Historical features of the development of Cuban health care. Comparative characteristics of health care

Cuba and the United Kingdom. Comparison of the indicators of the United Kingdom and Cuba. The Cuban health care system is the best in the world. Institute of Family Physicians. Medical education in Cuba. Preventive orientation of Cuban medicine. Problems of health care in Cuba. Taking care of the health of citizens in other countries.

Prerequisites for the benefits of the Cuban model of health care.

5. The UK healthcare system. The Essence of the UK Health Care System, History. Structure of the medical service. Rationing and control in health care. Medical staff. Financing and payment system. Similarities and differences between the healthcare systems of Russia and the UK.

6. Healthcare system in China and Korea. General characteristics of health care in the People's Republic of China. Dynamics of development. Transforming the health system – People's Republic of China. Traditional Chinese Medicine and

Pharmacology. Reforming the healthcare system in China. Priority areas for reforming the health care system. Topical problems of health care in China.

7. Japan's health care system. Health insurance.

Methodical recommendations for writing and formatting an abstract.

An essay is a creative activity of a Master's 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 a master's student, graduate student, applicant, solves a problem of a theoretical or practical nature, applying the scientific principles and methods of this branch of scientific knowledge. The result of this scientific 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 is carried out under the guidance of the supervisor and involves the acquisition of skills in building business cooperation based on the 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 master's student, a graduate student and a job seeker. The supervisor provides advisory assistance and evaluates the process and results of the activities. He provides an approximate topic of abstract work, clarifies the problem and topic of research together with the undergraduate, helps to plan and organize research activities, appoints the time and the minimum number of consultations. The supervisor accepts the text of the abstract for 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, supervisor, 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 socalled "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 Abstract Conclusion should contain: 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.

Topics and list of abstracts

1. Comparative analysis of health care systems in the system of market relations.

- 2. Medico-Legal Problems of Health Care Reform.
- 3. Health as an international legal category.
- 4. International Medical Law.
- 5. General characteristics of the health care system as a system.
- 6. Alma-Ata Conference in 1978. Its significance.
- 7. WHO the history of its origin.
- 8. WHO tasks, functions.
- 9. Comparison of the healthcare system in the UK and Russia
- 10. Comparison of the U.S. and Russian healthcare systems
- 11. North Korea's Health System
- 12. France's healthcare system
- 13. Denmark's healthcare system

14. Approaches to the classification of health systems

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 and carried out by the educational institution and student self-government bodies.

VI. MONITORING THE ACHIEVEMENT OF THE COURSE OBJECTIVES

Item	Supervised			Valuation T	ools - Name
No.	modules/secti ons/topics of	Codes and Stages of Competency Formation		Current control	Intermediate
	the discipline				Attestation
1	Section 1	PC-3.1;	• Knows the basics of	interview	Exam
	Health Care	PP-3.2;	planning and		Questions 1-51
	in Foreign	PP-3.3;	organizing activities	Tests	
	Countries	PP-6.1;	to ensure the		
		PC-6.2;	protection of public	presentation	
		PP-6.3	health, including		
			medical care;		
			Readiness to properly		
			execute official		
			medical documents, to		
			implement measures		
			to ensure public		
			health, including at		
			the international level		

VII. EDUCATIONAL AND METHODOLOGICAL SUPPORT OF THE DISCIPLINE

Reference citations

1. Lisitsin Yu.P., Ulumbekova G.E. Public Health and Healthcare. - GEOTAR-Media. – 2013. 544 p. (in Russian). Mode of access: <u>http://www.studentlibrary.ru/book/ISBN9785970426548.html</u>

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.http://www.studentlibrary.ru/book/ISBN9785970437100.html

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

4. Public Health and Health Care [Elektronnyi resurs]: uchebnik / Y. P. Lisitsyn, G. E. Ulumbekova. - 3rd ed., revised and supplemented - Moscow: GEOTAR-Media, 2015. - 544 p. (in Russian). - http://www.studentlibrary.ru/book/ISBN9785970432914.html

5. Public Health and Health Care [Elektronnyi resurs]: uchebnik / V. A. Medik, V. K. Yuriev. - 3rd ed., revised and supplemented - Moscow: GEOTAR-Media, 2015. – 288 p. – http://www.studentlibrary.ru/book/ISBN9785970433256.html

6. Public Health and Health Care, Health Economics In 2 vols. Vol. 1 [Elektronnyi resurs]: uchebnik / pod red. V. Z. Kucherenko. Moscow: GEOTAR-

Media, 2013. - http://www.studentlibrary.ru/book/ISBN9785970424148.html

7. Public Health and Public Health. Part 2: textbook in 2 ch.: / I.A. Naumov [i dr.]; Ed. by I.A. Naumov. Minsk: Vysheishaya shkola, 2013. 351 p. (in Russian). http://znanium.com/catalog.php?bokinfo=509081

8. Public Health and Public Health. National Guidance / Ed. by V. I. Starodubov, O. P. Shchepin et al. - Moscow: GEOTAR-Media, 2012. 624 p. (in Russian). <u>http://www.rosmedlib.ru/</u>

9. Petrov V.I., Nedogoda S.V. Evidence-Based Medicine by GEOTAR-Media. – 2012. 144 p. (in Russian). Mode of access: http://www.studentlibrary.ru/book/ISBN9785970423219.html

10. Sbornik zadach po obshchestvennomu zdorov'ye: uchebnometodicheskoe posobie [Collection of tasks on public health: educational and methodological manual]. – Electronic text data. Orenburg: Orenburg State Medical Academy, 2011. – 84 c. <u>http://www.iprbooksho p.ru/21865.html</u>

11. Economics of Health Care: Textbook. 2nd ed. Ed. by A.V. Reshetnikov. Moscow, GEOTAR-Media Publ., 2010. - 272 p. (in Russian). Mode of access: http://www.studmedlib.ru/book/ISBN9785970416044.html

Further reading

1. Petrov V.I., Nedogoda S.V. Meditsina, osnova na provedeniyah: uchebnoe posobie dlya meditsinskikh vuzov i postdiplomnogo obrazovaniya vrachov [Medicine, based on evidence: a textbook for medical universities and postgraduate education of doctors]. Moscow, GEOTAR-Media Publ., 2012, 141 p.

http://lib.dvfu.ru:8080/lib/item?id=cham o:730071&theme=FEFU

2. Trukhacheva N.V. Matematicheskaya statistiki v medico-biologicheskikh issledovaniya s primenenie paketa Statistica [Mathematical statistics in medical and biological research with the use of the Statistica package]. Moscow, GEOTAR-Media Publ., 2012. 379 p. (in Russian).

http://lib.dvfu.ru:8080/lib/item?id=cham o:730137&theme=FEFU

3. Ulumbekova G.E. Zdravookhraneniye Rossii [Health care of Russia]. What to do. Scientific substantiation of the "Strategy for the Development of Health Care in the Russian Federation until 2020". Moscow: GEOTAR – Media, 2010. 594 p. (in Russian).

<u>http://lib.dvfu.ru:8080/lib/item?id=Ge</u> <u>otar:/usr/vtls/ChamoHome/visualizer/data_ge</u> otar/geotar.xml.part1816.. <u>xml&theme=FEFU</u>

4. Health Care Economics. Reshetnikov A.V. – M. : GEOTAR-MED, 2nd ed., 2010. 272 p. (in Russian).

http://lib.dvfu.ru:8080/lib/item?id=cham o:350145&theme=FEFU

5. Alekseev V.A., Borisov K.N. Obzor sistem zdravookhraneniye v stran mira [Review of health care systems in the countries of the world]. International Health/2011 <u>http://rosmedportal.com</u>

6. Alekseev V.A., Borisov K.N. Paradoxes in the assessment of the health care system of Canada: public dissatisfaction with the system and panegyric on official statistics <u>http://health-ua.com/articles/1668.html 2011</u>.

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

8. World Development Indicators: Incidence of tuberculosis (per 100,000 people)

http://data.worldbank.org/indicator/SH.TBS.INCD/countries?display=default

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

10.Edward W. Campion, M.D., and Stephen Morrissey, Ph.D. A Different Model — Medical Care in Cuba N Engl J Med 2013; 368:297-299January 24, 2013DOI: 10.1056/NEJMp1215226

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

11.HealthInsurance:GeneralCharacteristicshttp://www.pacificprime.com/country/

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

13. Peter Lind Failure of American Health Care http://communities.washingtontimes.com/neighborhood/stress-and-health-dr-lind/2012/nov/4/failure-american-health-care/

14.Tara Weiss Reasons Not To Become A Doctor http://www.forbes.com/2008/05/05/physicians-training-prospects-lead-careerscx_tw_0505doctors.html

15.UNESCOSantiagoofferedaworkshoponhealthliteracyinCuba22.04.2014-UNESCOOfficeinSantiagohttp://www.unesco.org/new/en/member-states/single-

<u>view/news/alfabetizacion_en_salud_la_unesco_santiago_imparte_taller_en_cuba/#</u> .U5rISPl_uCk

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

17. Alex K. Health System in Cuba <u>http://cyberland.ws/687-sistema-</u> zdravoohraneniya-na-kube.html 18. Alekseev V.A., Borisov K.N., Rozhetskaya S.V. Head of HealthcareFacilities / International Health Care / Volume 2 2011 / Problems of Health Care intheUSAandtheUndertakenReformhttp://www.rosmedportal.com/index.php?option=com_content&view=article&id=1410:2011-10-11-21-28-46&catid=25:the-project

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

20.Global Health Observatory Data Repository http://apps.who.int/gho/data/node.main.75?lang=en

National Health Expenditure Data (U.S.) from the United States Department of Health and Human Services (CMS) <u>http://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-</u>

<u>Reports/NationalHealthExpendData/index.html?redirect=/NationalHealthExpendD</u> <u>ata/01_Overview.asp</u>

22.John Waller Cuba - Health for All http://latinos.by.ru/cuba/index.html

23. Efimova M. Healing America. A History of the U.S. Health Care System http://www.svoboda.org/content/transcript/1882910.html

24.Health care in Cuba (based on health-ua.com) <u>http://kpu-</u> ch.com/news/zdravookhranenie_kuby/2012-05-24-841

25. Cancidailo T. Healthcare of Cuba: An Example for Many Countries <u>http://health-ua.com/articles/3692.html</u>

26. Kipervas I. American Medicine: Pros and Cons http://www.rusamny.com/357/t04(357).htm

27. Kozlov K. USA: A Brief Overview of Sberbank of Russia's Health Care Reform 2010

http://www.sbrf.ru/common/img/uploaded/files/pdf/press_center/Review_us_healt h_reform.pdf

28.Medical Record Cuban Health Care Has Been Named a Benchmark of World Quality <u>http://medkarta.com/?cat=new&id=4121&s=0</u>

29. National Center for Health Statistics http://www.cdc.gov/nchs/

United States profile from the World Health Organization http://www.who.int/countries/usa/en/

31.World Health Organization website

http://www.who.int/ru/

32. Secrets of Cuban medicine. Why does an impoverished country treat its citizens better than Russia? Arguments and Facts No 38 (1195) <u>http://gazeta.aif.ru/_/online/aif/1195/15_01</u>

33. M. Tanner "Comparative Analysis of Health Systems in Different Countries" <u>http://polit.ru/article/2010/05/31/healthcare/</u>

34.Financing of health systems. The path to universal health coverage. World Health Report 2010. – 106. p. <u>http://www.who.int/whr/2010/whr10_ru.pdf?ua=1</u>

35. The Social Insurance Fund of the Russian Federation - http://www.fss.ru/ru/

36. Center for Medical Law

http://pravo-med.ru/

37. Shvedova N. U.S. Health Care (Economist's View) http://www.narcom.ru/publ/info/574

38.Epidemic of Modern Medicine

http://www.pubhealth.spb.ru/Illich/NemesisEpid.htm1

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

1.Patent Database and Patent Search <u>http://www.freepatent.ru/</u>

 $\begin{array}{cccc} 2. On line & Health & Portal & \underline{http://bio-x.ru/}\\ go.mail.ru/search?rf=e.mail.ru&fm=1&us=15&usln=3&usstr=healthcare&usqid=7\\ \underline{d41348ea69338f3&hasnavig=1&sbmt=1509229987234&q=healthcare}\\ \end{array}$

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

4. SSAU Electronic Library - <u>http://library.sgau.ru</u>

5.NEB - http://elibrary.ru

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

7. Student Library <u>http://www.studmedlib.ru</u>

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

9.http://www.r<u>o sminzdrav.ru</u> Official website of the Ministry of Health of the Russian Federation

10.http://meduniver.c<u>om</u> 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 exercises of the course are conducted in all sections of the curriculum. Practical work is aimed at developing students' skills of independent research work. In the course of practical classes, the master performs a set of tasks that allow him to consolidate the lecture material on the topic under study.

Active consolidation of theoretical knowledge is facilitated by the discussion of problematic aspects of the discipline in the form of a seminar and classes using active learning methods. At the same time, 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.

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, an interview and a survey are conducted.

IX. MATERIAL AND TECHNICAL SUPPORT OF DISCIPLINE

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

Name of Equipped Premises and Self-Study Rooms	List of Main Equipment
690922, Primorsky Krai,	Multimedia audience:
Vladivostok, Russky Island,	Electric Screen 236*147cm Trim Screen Line; DLP projector,
Saperny Peninsula, Ajax	3000 ANSI Lm, WXGA 1280x800, 2000:1 EW330U Mitsubishi;
village, 10, School of	CP355AF Avervision visualizer, MP-HD718 Multipix camcorder;
Biomedicine, room M 422,	CORSA-2007 Tuarex Specialized Equipment Fastening
area 158.6 m ²	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,	Multimedia audience:
Vladivostok, Russky Island,	Electric Screen 236*147cm Trim Screen Line; DLP projector,
Saperny Peninsula, Ajax	3000 ANSI Lm, WXGA 1280x800, 2000:1 EW330U Mitsubishi;
Village, 10, School of	CP355AF Avervision visualizer, MP-HD718 Multipix camcorder;
Biomedicine, aud. M 419, area	CORSA-2007 Tuarex Specialized Equipment Fastening
74.9 m ²	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,	Computer class for 22 workplaces:
Vladivostok, Russky Island,	HP RgoOpe 400 All-in-One 19.5 (1600x900), Core i3-4150T,
Saperny Peninsula, Ajax	4GB DDR3-1600 (1x4GB), 1TB HDD 7200 SATA, DVD+/-RW,
Village, 10,	GigEth, Wi-Fi, VT, usb kbd/mse, Win7Pro (64-
Oud. M612, area 47.2 m ²	bit)+Win8.1Pro(64-bit), 1-1-1 Wty (25 pcs.)
Reading rooms of the FEFU	HP RgoOpe 400 All-in-One 19.5 (1600x900), Core i3-4150T,
Scientific Library with open	4GB DDR3-1600 (1x4GB), 1TB HDD 7200 SATA, DVD+/-
access to the collection	RW,GigEth,Wi-Fi,VT,usb kbd/mse,Win7Pro (64-
(building A - level 10)	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
	ž

X. VALUATION FUND WOS Passport

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

Task type	Code and name of professional competence (result of mastering)	Code and name of the competency indicator
Organizational and managerial	PC-6 Ability to develop plans and programs, form a system of indicators for the activities of a medical organization, assess the effectiveness of the activities of a medical organization, develop options for management decisions and assess the risks associated with their implementation	PC-6.1 Knows the peculiarities of the formation of the system of indicators of a medical organization PC-6.2 Is able to assess the effectiveness of the activities of a medical organization, taking into account the formed system of indicators PC-6.3 Possesses the skills of forming performance indicators, assessing their effectiveness, as well as the ability to develop management decisions with an assessment of the risks associated with their implementation

Code and name of the competency	Name of the assessment indicator
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	Knows the quality management system of a medical
a medical organization and implement	organization
a quality management system	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	Knows the reporting documentation of the medical organization
in the preparation of reporting	Is able to prepare reporting documentation for a medical
documentation, assessment of the	organization
activities of a health care institution	Possesses the necessary skills for the preparation of reporting
	documentation, assessment of the activities of a health care
	institution
PC-6.1 Knows the peculiarities of the	Knows the specifics of the formation of the system of indicators
formation of the system of indicators of	of a medical organization
a medical organization	Able to form and fulfill the indicators of a medical organization Possesses the skill of forming and fulfilling the indicators of a
	medical organization
PC-6.2 Is able to assess the	Knows the main performance indicators of a medical
PC-6.2 Is able to assess the effectiveness of the activities of a	organization
medical organization, taking into	Is able to assess the effectiveness of a medical organization,
account the formed system of	taking into account the formed system of indicators
indicators	Possesses the skill of assessing the effectiveness of the activities
indicators	of a medical organization, taking into account the formed
	system of indicators
PC-6.3 Possesses the skills of forming	Knows the main performance indicators of a medical
performance indicators, assessing their	organization
effectiveness, as well as the ability to	Is able to generate performance indicators, assess their
	effectiveness, and assess the risks associated with their
develop management decisions with	
develop management decisions with an assessment of the risks associated	implementation

Possesses the skills of forming performance indicators, assessing their effectiveness, as well as the ability to develop management decisions with an assessment of the risks associated with their implementation

The result of training is considered to be achieved if the level of competence formation is more than 60%, i.e. most of the indicators are assessed positively.

2 Evaluation Tools

Test Questions

1. The World Health Organization lists the factors influencing health:

(a) Income and social status;

b) social support: family, friends and environment;

c) education;

d) profession and working conditions;

e) natural environment;

(e) Personal hygiene and self-care;

g) genetic inheritance;

g) the level of medical care in the region of residence.

2. Who finances the health care system in Canada?

-Financing is provided by local taxes

-Financing is provided by state income taxes

- Financing is carried out at the expense of employers

- Financing is carried out through the purchase of insurance poles

-health care in Canada is paid

3. Who finances the health care system in Cuba?

-Financing is provided by local taxes

-Financing is provided by state income taxes

- Financing is carried out at the expense of employers

- Financing is carried out through the purchase of insurance poles

- Healthcare in Cuba is paid

4. Who finances the U.S. health care system?

-Financing is provided by local taxes

-Financing is provided by state income taxes

- Financing is carried out at the expense of employers

- Financing is carried out through the purchase of insurance poles

- Healthcare in the United States is paid

5. Who finances the UK's healthcare system?

-Financing is provided by local taxes

-Financing is provided by state income taxes

- Financing is carried out at the expense of employers

- Financing is carried out through the purchase of insurance poles

-Healthcare in the UK is paid

6. Who finances South Korea's healthcare system?

-Financing is provided by local taxes

-Financing is provided by state income taxes

- Financing is carried out at the expense of employers

- Financing is carried out through the purchase of insurance poles

-Healthcare in South Korea is paid

7. Who Finances North Korea's Health Care System?

-Financing is provided by local taxes

-Financing is provided by state income taxes

- Financing is carried out at the expense of employers

- Financing is carried out through the purchase of insurance poles

-Healthcare in North Korea is paid

8. Who finances Japan's healthcare system?

-Financing is provided by local taxes

-Financing is provided by state income taxes

- Financing is carried out at the expense of employers

- Financing is carried out through the purchase of insurance poles

-Healthcare in Japan is paid

9. Which country voted the best health care system in the world in 1978? -in Canada

- Cuba

-in the USA

-in the UK

-in Japan

- in Russia

10. Which country ranked the best healthcare system in the world in 2012? -in Canada

- Cuba

-in the USA -in the UK -in Japan - in Russia

11. In which country did the formulary system originate?
-in Canada
- Cuba
-in the USA
-in the UK
-in Japan
- in Russia

12. What does the Canadian Health Act guarantee?

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

- Every resident of Canada has the right to health care by the country's health care facilities and workers

- The health care system in Canada is managed by government representatives and elected officials.

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

- Representatives are accountable to the people of Canada.

- immigrants with a residence permit and conventional refugees are not entitled to medical care

13. The Canada Public Health Act was enacted into law

- in 1947 -in 1984 -in 2005 -in 2013

14. The U.S. is the leader in terms of

- the level and effectiveness of scientific research

-Lifespan

-Incidence

- the number of Nobel laureates in the field of medicine

- Availability of the most modern medical equipment

15. In 2000, the United States ranked in terms of the health of its citizens
-56th place in the world
-1st place in the world
-2nd place in the world
72nd place in the world

16. Does the U.S. guarantee its citizens a universal and comprehensive health insurance system?

-Yes -No - The U.S. does not work under health insurance programs

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

- 45,000 additional deaths per year

- 14,000 additional deaths per year

- 78,000 additional deaths per year

- There is no health insurance in the United States, medical care is funded by the state

18. The functions of the U.S. Department of Health and Human Services include

- control over the medical system and the implementation of social programs

- Supervision of medical science

- Monitoring of the health situation

- Monitoring the provision of medical care to all U.S. citizens

19. U.S. Medicine Operates on the Following Levels

-Primary Health Care

- Family Medicine

- Hospital care
- -High-tech assistance
- -Public Health

20. Is there a single centralized health care management in the United States?Yes, there is, its functions are performed by the US Department of Health

and Human Services

- Yes, there is, its functions are performed by a department of the U.S. Government

- There is no unified centralized management

21. What Types of Hospitals Are There in the US

-State

-Municipal

- Private profitable

-private "non-profit"

22. The following services are provided by the U.S. Medicaid program

- Inpatient and outpatient treatment

- Consultations with surgeons

- Consultations with ophthalmologists

- stay in nursing homes,

- Laboratory diagnostics

- X-ray examination methods

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

-4 years

-6 years

-8 years

-2 years

24. The duration of residency in the U.S. is

-2 years

-3 years

-4 years

-5 years

25. According to the U.S. Department of Health and Human Services, by 2017, medical spending will be

15.5% of GDP11% of GDP17.5% of GDP19.5% of GDP

26. What types of insurance are provided by U.S. employers?

- "Service Fee"

-"Managed Services"

-"All Inclusive"

27. What is the Minimum Cost of Health Insurance for 1 Month in the US - \$50

-\$130 - \$150

- \$300

28. Which U.S. president created Medicare and Medicaid?

Johnson

Truman

Crankcase

Reagan

Obama

29. Life expectancy is the most

-in the USA

-in Canada

- in Russia

30. What is Canada's main health problem?

- Poor quality of medical care

- Long queues waiting for an appointment

- high prices for medical services

- Shortage of doctors

- Shortage of nurses

- Low salaries of doctors

- Paid physiotherapy treatment

31. Canadian Health Act

- prohibits the provision of paid medical services

- allows the provision of paid medical services

- Authorizes the provision of paid health services that are not provided for in municipal health plans

32. Hospitals in Canada are mostly -Private -State -Municipal

33. Which country has the highest availability of doctors?
-in the USA
-in the UK
-in France
-in Russia

34. Which country has the highest provision of nurses-in the USA-in the UK-in France-in Russia

35 In Canada Smoking
-15% of the population
-18% of the population
- 23% of the population
-26.5% of the population

36. Cuba's health budget in 2012 was as high as

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

37. What is the main health problem in Cuba?

- Poor quality of medical care
- Long queues waiting for an appointment
- high prices for medical services
- Shortage of doctors
- Shortage of nurses
- Low salaries of doctors
- Paid physiotherapy treatment