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The necessity of Ukrainian family doctor training improve with due account for foreign experience

The prospects of Ukrainian Euro integration and successful solution of the strategic tasks of the modern educational policy in Ukraine cause the proper study and taking into account progressive tendencies of the European higher education system development, particularly the Bologna process as the first attempt of making the united space of the higher education and science in Europe. Investigation of European experience of providing the quality of certificates and diplomas will promote the efficiency and quality of higher education in Ukraine raising during the intensification of society democratization, and its entering the European social, economical, cultural and educational space [Poberezhska 2005: 4].

A new ideology that is found on modern tendencies of the modern medical education development bases on values, aims and strategy's priorities of the professional education. Nowadays the main accent in the medical education should be done on the preparation of the broad-minded doctors with comprehensive skills, as Ya. Tsehmister says [Tsehmister 2002: 107–108].

O. Kobzar emphasizes, that the main social task of the new idea of the Ukrainian medical school reform is the formation of the professional physician, who is comprehensively prepared for the successful social and professional activity, who is able to analyze historical and present events, processes and problems of the social life; to use laws and dialectical categories during the estimation of the influence of the environment on the human's organism; to work out and use modern progressive measures of prevention, diagnostics and cure, that are directed to the saving population's health. And at the same time to provide the forming of the manpower; to keep the principles of the professional ethics and medical education according to the modern tasks of the improving the doctor's training, who will be able to work during quick changing of the social and economic priorities in Ukraine's development [Kovzar 1997: 3].

Nowadays there is a main conception in Europe, and according to it, there is a possibility to make standard model of the educational system using the experience of the most effective educational reform in some countries. And this model

will be common for the whole region including only positive and progressive features [Balatska 2004: 1].

During all the 20th century education in general and medical one in particular has such reformation traits as making the continuous educational system, strengthening the state control of education, improving resources support of the studying process, making the systems of the professional orientation and stuffing, organization of adults' education [Terent`eva 2005: 5]. Main reforming priorities of the ideology of the world higher educational system are humanization, fundamentalization, individualization, innovational character, democratization, and international integration [Navrotskiy 2000].

However, medical education has some specific features among all the other spheres of the professional education. Investigators of the modern European medical education V. Kazakov, O. Talalaenko and M. Pervak emphasize that comparing to the other spheres of higher professional education the doctors' training is rather stable and even conservative, and it is not well to reforming. Firstly it can be explained by the understanding of the great hazard if something goes wrong because of all reforms poor prognosis, secondly by the wish not to brake the existing medical educational systems [Kazakov 2008: 3]. In spite of all these facts, there is active setting up of the Bologna process to the medical education nowadays, and it is caused by objective reasons to co-ordinate educational systems of individual countries within the Europe unification process. The head office of Association for Medical Education in Europe (AMEE) is located in The Great Britain (Dundee, Scotland). Not only European counties are included to the exchange of the experience of the medical education's perfection, but also there are Asia, North America, and Australia. It is rather obvious, that activation of the Ukraine's role in such processes will promote the development of Ukrainian education in medical sphere, and finally it may result in becoming stronger heals of Ukrainian citizen thanks to the doctor's help and diseases prevention according to the modern world standards.

Not only portability and efficiency improvement is the main aim of the health care system reform in Europe, but also the control of expense and synchronous rising of service quality [Ross 2008: 29]. It demands corresponding orientation of the medical education, especially when it is about care of patients using not standard „conveyor” method, but merely individual-consulting, and as much as possible personificated approach within tradition of the theoretical and practical training of family doctors.

On international forums, which are devoted to the perspective of medical education development, the biggest discussions are caused by the question about the status and perspectives for the work of Bachelor of Medicine (it is supposed that this degree takes place), the role of licensed tests (not only national, but also common European ones) [Kazakov 2008: 4].

In spite of some problems, debatable theoretical questions and practical difficulties, there are all reasons to agree with O. Kobzar's statement, i.e., to integrate to the world space of medical education means first of all to obtain knowledge in creative way, like the students of the best foreign higher medical schools do, using the most modern scientific and didactic methods of studying. Solution of this task includes studying of the content of the foreign professional educational curriculum, and setting up modern courses, critical estimation of the content of every discipline, using progressive ideas of foreign colleagues, translation and using the best foreign study books and educational supplies, inviting advanced foreign lecturers to the work in the Ukrainian high schools [Kobzar 1997: 19–20].

According to the conception of the Family Medicine Chair at O. Bohomolets NMU, family medicine as a new medical specialty in Ukraine makes get a new point about doctors' training, demands from a doctor both knowledge, skills and methodical appliances. Family Medicine methods are unique, because a family doctor is a patient's guide to the health care system, and a doctor must not only give the first aid, but estimate common health level. The core of family medicine methodic is the relations between a doctor and a patient.

The problem of training of medical personnel is in the centre of attention of higher medical education. It is explained by rising of the influence of health care to the modern society, importance of the first aid and necessity to rule the manpower. Science development, medical achievements, appearance of new basic research promote rising of necessity in well-educated medical personnel, setting up family medicine, changing conceptions of higher education.

It is all confirmed by educational reforms, which have enveloped all the developed countries. Modernization of the higher medical education takes place in Ukraine in context of European integration. However, it is a question: what is a level of conformity of Ukrainian medical education to the high international level and to the deep traditions of national education? You know that a doctor has always been a standard of honest, mercy, a model for service to the people. That is why it is very actual and valuable to study and to use the advanced experience of other foreign countries.

Ukrainian experience of family medicine traditions' formation has been developing for more than 20 years, since 1987 when in Drogobych (Lviv region) the first out-patient clinic of general practice – family medicine was opened.

In 1995 Ministry of Public Health of Ukraine approved the special program for family doctors training. Nowadays there is a specialty in internship which is called „General practice — Family Medicine”. This specialty can be obtained as a first one, or as a result of post-diploma education for graduates with the specialty „General Medicine” or „Paediatrics”. Contingent of users of a family doctor is formed by the right of a citizen to choose a doctor freely. Procedure of

family doctor work is determined by the executive authorities responsible for health care.

Assignment of the primary curative and prevention aid at the out-patient clinic or at home is a family doctor's function, and it is regulated by the order # 303 of the Ministry of Health of Ukraine from 23 July, 2001.

The law of Ukraine # 1841-VI „About the approval of State program of development primary medical aid based on family medicine till 2011” was passed in 22 January, 2010. There exists the Coordinating Council of setting up family medicine attached to Ministry of Health of Ukraine (more information can be obtained from its web-site). Also there is the Ukrainian Association of Family Medicine.

In 1997 at NMU the Chair of general practice – family medicine was found. It was one of the firsts in Ukraine and based on the Chair of hospital therapy # 3 with the course of military-field therapy.

According to the conception of a family doctor training at NMU, the base of new methodic is *syndrome method*, which is necessary for giving the primary aid having any problem. The first step for making this method is an *algorithm* of giving aid for any symptom or syndrome in general practice. Other important feature of family medicine is long observation of the patient, during whole the life as the best variant. Different forms of organization and financing of family practice demands a doctor to know the base of economics and finances, principles of health care organization. The base of this specific knowledge and skills final year students get during the elective course „Propaedeutics of Family Medicine”, which includes such topics, as „Psychological aspects of general practitioner's work”, „Informational technologies and informational support of general practitioner's activity”, etc.

The course „Organizing bases of family medicine” can be chosen by the 5-year students after they had courses of Physiology, Pharmacology, Clinical Pharmacology, Psychiatry, Psychology, Hygiene of nutrition, Social Medicine, General Hygiene and all clinical courses, which are necessary during the mentioned course. The study of peculiarities of communication with the patient and his family are supposed, also knowing of economical aspects of family doctor actions, management and marketing of family medicine, and bases of calculating medical documents are necessary. Medical students should comprehend the appropriateness of transition of territorial principle of giving medical aid to family medicine.

Before 2004–2005 the NMU trained only 1–2 interns in the specialty of „Family Medicine” per year. But then this amount has risen extremely: in 2005–2006 – 30 people, in 2006–2007 – 60, in 2007–2008 – 32, in 2008–2009 – 29, in 2009–2010 – 15, and 20 people in 2010–2011. 1% of the appointments are given by Ministry of Health of Ukraine, all the others – by Kiev City State Administration. There is also Family Medicine Centre attached to NMU, which trains family

doctors after 2 year lasting internship. Nowadays also there are other chairs of family medicine at almost all medical schools of Ukraine. L. Pasieshvili and A. Zazdravnov emphasize, that usually in the developed countries a patient sees a doctor about his health, but not illness. And exactly in these countries, the community of which Ukraine wants to join, the main specialty is family medicine. In Great Britain 75% of physicians are family doctors, in German and France – 54%, in Austria 40% [Pasieshvili, Zazdravnov].

Abstract

The prospects of Ukrainian Euro integration and successful solution of the strategic tasks of the modern educational policy in Ukraine cause the proper study and taking into account progressive tendencies of the European higher education system development, particularly the Bologna process as the first attempt of making the united space of the higher education and science in Europe.

Key words: Bologna process, the Euro-integration, the educational system.

Konieczność doksztalcania ukraińskich lekarzy rodzinnych z uwzględnieniem doświadczeń zagranicznych

Streszczenie

Perspektywy euro-integracji Ukrainy w zakresie wprowadzania skutecznych rozwiązań strategicznych zadań współczesnej polityki edukacyjnej na Ukrainie mogą spowodować odpowiednie badania. Postępowe tendencje w rozwoju europejskiego systemu szkolnictwa wyższego, szczególnie w realizacji procesu bolońskiego, są pierwszą próbą dokonania przestrzeni zjednoczonego szkolnictwa wyższego i badań naukowych w Europie.

Słowa kluczowe: proces boloński, euro-integracja, system edukacyjny.