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Short Communication

The Experience of Strategic Partnership Between Başkent University and Semey Medical University on The Modernization of Medical Training

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Abstract

Since 1991 Kazakhstan has formed up a series of development projects regarding the modernization of the healthcare services. The formation of social health insurance and developments in medical education was followed by a Social Health Insurance Project to increase the accessibility, quality, and efficiency of health service delivery and reduce financial risks to the population caused by severe health problems. As a part of the Project, Semey Medical University and Başkent University became strategic partners to develop not only the education of the future medical doctors but also the management of the University Hospital. The project last for 21 months. Although pandemic restrictions caused some obstacles during the implementation of the project, all the tasks and activities were executed with a successful cooperation of the experts of both parties. The development of the curriculum, implementation of the Başkent University Medical Education Model, the modernization of the defined clinics as well as the development of the financial and strategic decision making of the governance were the main tasks of the project. The success of this partnership leads to new projects to enable the sustainability of the implemented models.

Keywords: Kazakhstan, Semey Medical University, Başkent University, Başkent University Medical Education Model, Medical Education, World Bank, Project Implementation, Modernization, Healthcare Services.

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Introduction

Kazakhstan started to develop all national operations according to the western forms soon after getting its independence by 1991 [1,2,3]. Especially the reforms on health care at all levels take an advance. In 2006, the Ministry of Health of the Republic of Kazakhstan launched the reform of medical education with a new curriculum promoting the development of student-centered methods of instruction. By 2011, the Ministry encouraged a competency and community-based curriculum, reflecting the national priorities in health care [4,5].

The formation of social health insurance and developments in medical education was followed by a Social Health Insurance Project to increase the accessibility, quality, and efficiency of health service delivery and reduce financial risks to the population caused by severe health problems.

As part of the primary project, the Strategic Partnership in the "modernization of University management processes and training of specialists in orthopedics and traumatology, radiology/nuclear medicine, and emergency care" was offered by Semey Medical University (SMU) to Baškent University (BU), Ankara, Turkey, in July 2018. The parties signed the project in November 2018, and the project got a start in January 2019.

The first half of the project was planned as a descriptive epidemiological study, which allowed the experts to see the whole picture. The second half was designed to restructure the existing model with necessary add-ons and changes to enable the proven "Baškent University Medical Education Model".

Since the project's central core is the Baškent University Medical Education Model, the steps that should be taken and the implementation process were put in detail to prevent any possible errors.

During the implementation phase, all hindered obstacles were handled successfully with the proper planning and fast-paced solution creation of both parties until the pandemic declaration of the World Health Organization. Since all borders were closed and the preventive health measures were alarmed, the planned face-to-face activities were forced to be executed online.

Despite the fact that COVID 19 Pandemic complicated the implementation phase, the project team of BU achieved all the expected outcomes and planned outputs that were launched by January 2019.

The Progress and the Completion Rate of the Project

The project was managed in three phases with two project teams (Figure 1). Under the supervision of the project manager, a team of key experts worked on the tasks, and an administrative unit followed up the project process. Every quarter the progress of the project was analyzed according to Key Performance Indicators, and the deviation of the timeline was calculated by the project management team. Regarding the results, the task leaders were informed about the issues, if any, and the

necessary interfering's took place. The assessment of the project at every quarter enabled project management to prevent the snowball effect and the smooth execution of the implementation phase. In order to identify the unexpected constraints faced by the key experts during the implementation, monthly meetings were held. During these meetings, the issues that came forward were discussed, and necessary actions were planned.



Figure 1 - The Phases of the Project Management

The project was finalized on time without any delay. All constraints, whether hindered or not, were solved with the harmonic work between the two parties. By March 2020, the indispensable challenges of the COVID-19 Pandemic caused a loss of seven active months, designed to monitor the activities and training mobility. As a result of restrictions, all field studies had to be canceled and performed at home via online meetings as well as trainings.

In the course of the project, there happen to be an intensive mobility process with 65 staff and 19 students in 14 months (Table 1). Regarding the professional education of the staff of SMU, a total of 150 trainings and 10 masterclasses took place (Table 2).

Table 1 - The distribution of the project mobility according to type and sex

Staff Mobility		Female	Male
Type of the staff	Dean	6	4
	Academic	30	21
	Administrative	2	2
Student Mobility			
Terms	2	4	2
	4	3	0
	5	3	0
	6	5	2

Throughout the project, the management team and key experts of BU submitted 308 reports comprising the analysis studies, the progress of the project, and monitoring activities.

Despite the Pandemic, the team of BU finalized the project with 100% achievement with their talent of agility and the quick response rate for the partner's (SMU) requests.

Table 2 - The distribution of the activities completed during the Project

Type of Activity	Number
Academic Staff Training	150
Masterclasses	30
Field Studies	29
Joint Research Projects	10

Project Outcomes

The Project outcomes gathered under 8 main tasks (Figure 2), with 56 activities were defined with time-based frames such as short-term (ST), medium-term (MT), and long-term (LT). The instancy of the outcome stated the timeline of the related work schedule. For instance, for the modernization of the SMU Process Management, the

ST outcomes were defined as the determination of the needs of the system while the clinic tasks of orthopedics, emergency medicine, and radiology/nuclear medicine the ST outcomes were the development of the immediate concerns such as the implementation of the tirage system.



Figure 2 - The Project Tree

On clinical tasks (Tasks 2, 3, 4), the ST outputs were set forth as the implementation of the diagnostics and treatment models. Regarding management titled tasks (Tasks 1,8), ST's defined as the designation of the plans that were the desideratum, such as risk management, strategy planning, etc. The education-based tasks (5,6,7) stated capacity-building plans as ST outputs.

were mainly determined to sustain and stabilize the mainframe that was implemented. The development of SMU has been monitored since the finalization of the project to sustain the development.

The MT outputs were the main core of the project and attained during the process. However, LT outputs

Recommendations

The official/legislative regulations regarding research activities and academic medical programs are different from Western countries, which is a handicap for the modernization of the research and education activities at SMU and Kazakhstan.

The habits of senior professors regarding teaching activities and the financial habits of the administration should be taken into special consideration. They can be significant obstacles during the development of the modernization of Kazakhstan's higher education.

Regarding the project; the suggestions of the key experts of BU are as follows:

- Recognition of the importance of the experience in managing trauma patients is critical in the health care system.

Conclusion

The collaborative works should continue in future projects to enable the development, implementation, and sustainability of the Başkent University Medical Education Model. Through long-term cooperation and

- The implementation of key concepts for Orthopedics and Traumatology, Radiology/Nuclear Medicine, and Emergency Medicine is of utmost importance for the academic curriculum.

- Infrastructure, including histology and biomechanical labs, bioethics, and biostatistics departments, is mandatory for scientific research.

- Determining the desired content of continuing medical education is imperative for future training in medicine.

- All aspects of Orthopedics and Traumatology, Radiology/Nuclear Medicine, and Emergency Medicine with their subsections are final and necessary to have a complete treatment plan.

communication, joint training programs, and scientific projects, the development of the health care personnel and academic staff of both Semey Medical University and Kazakhstan will be finalized.

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Башкент университеті мен Семей медициналық университетінің медициналық білім беруді модернизациялау аясындағы стратегиялық серіктестік тәжірибесі

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Түйіндеме

Қазақстанда 1991 жылдан бастап денсаулық сақтау жүйесін жаңғырту бойынша бірқатар жобалар жүзеге асырылып келеді. Әлеуметтік медициналық сақтандыру жүйесін қалыптастыру және медициналық білім беруді дамыту тұрғындарға көрсетілетін медициналық қызметтер сапасын, оның қолжетімділігін және тиімділігін арттыруға, сондай-ақ, тұрғындар үшін қаржылық тәуекелдерді төмендетуге бағытталған әлеуметтік медициналық сақтандыру жобасымен жалғасын тапты.

Семей медициналық университеті мен Башкент университеті тек медициналық білім беру саласында ғана емес, сонымен қатар, университет клиникасын басқаруды дамытуда стратегиялық серіктестерге айналды. Жоба 21 ай мерзім

ішінде жүзеге асырылды. Жобаны орындау барысында COVID-19 пандемиясы тудырған шектеулер мен кедергілерге қарамастан, барлық міндеттер мен жоспарланған іс-шаралар екі тарап сарапшыларының табысты ынтымақтастығының арқасында сәтті аяқталды.

Жобаның негізгі міндеттері оқу бағдарламаларын әзірлеу, Башкент университетінің медициналық білім беру моделін енгізу, университет клиникаларын жаңғырту, сондай-ақ, қаржылық және стратегиялық шешімдер қабылдау жүйесін дамыту болды. Сәтті ынтымақтастықтың нәтижесінде құрылған модельдердің жүзеге асырылуының тұрақтылығын қамтамасыз етуге бағытталған жаңа жобалар пайда болды.

Түйін сөздер: Қазақстан, Семей медициналық университеті, Башкент университеті, Башкент университетінің медициналық білім беру моделі, медициналық білім, Дүниежүзілік банк, жобаны жүзеге асыру, жаңғырту, денсаулық сақтау жүйесінің қызметтері.

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Резюме

В Казахстане начиная с 1991 года реализован ряд проектов по модернизации системы здравоохранения. За формированием системы социального медицинского страхования и развитием медицинского образования последовал проект социального медицинского страхования, направленный на повышение качества, доступности и эффективности медицинских услуг, а также на снижение финансовых рисков для населения.

Медицинский университет Семей и Университет Башкент стали стратегическими партнерами по развитию не только медицинского образования, но и управления университетской клиникой. Реализация данного проекта заняла в общей сложности 21 месяцев. Несмотря на ограничения и препятствия, вызванные пандемией COVID-19 во время реализации проекта, все задачи и запланированные мероприятия были выполнены за счет успешного сотрудничества экспертов с обеих сторон.

Основными задачами проекта были разработка учебных программ, внедрение модели медицинского образования Университета Башкент, модернизация клиник, а также развитие системы принятия финансовых и стратегических решений. В результате успешного сотрудничества появились новые проекты, обеспечивающие устойчивость внедренных моделей.

Ключевые слова: Казахстан, Медицинский университет Семей, Университет Башкента, модель медицинского образования Башкентского университета, медицинское образование, Всемирный банк, реализация проекта, модернизация, услуги здравоохранения.