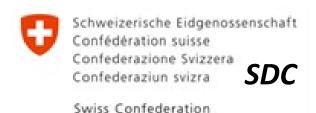


Кыргыз Республикасында медициналык билим берүүнүн реформалары Проект «Реформы медицинского образования в Кыргызской Республике» Reforms in medical education in the Kyrgyz Republic project

CME - CPD Challenges from Kyrgyzstan

Louis Loutan

Medical Education Reform project







Kyrgyzstan















Reforms in Medical Education of the Kyrgyz Republic - MER - SDC

Objective

 Quality of medical education/training is improved and better connected to rural health system's needs and practice

- Pre-graduate medical education
- Post-graduate medical education
- Continuing Medical Education
- Nursing education reform







Challenges

Health work force

- Shortage and aging of doctors and nurses in rural areas
- Too many specialists, not enough GP/FM doctors
- Low salaries, little incentives, difficult working conditions
- Migration of doctors and nurses
- GP/FM doctors' image is low

Medical Education: improve quality - decentralize

- Pre-grad: selection of students; increase clinical experience, go to the regions, introduce FM in curriculum
- Post-grad: to become fully clinical training, use hospitals and FMCs in the regions, define training requirements
- CME: continuing, closer to practice site, credit collection revised

Challenges

- Financing and organization :
 - Very low salaries of doctors and nurses
 - Dual responsibility: Min. of Health and Min. of Education
 - Little public financial support for medical education
 - Large number of students (source of income), little access to patients
- Post-graduate training PGME
 - GP/FM not well recognized
 - No training requirements established for narrow specialties
 - Large number of residents
 - Universities in charge little responsibily given to clinical facilities
 - PGME disconnected from the healthcare system
 - Competition between universities to access medical facilities
 - No short term positions in clinical facilities to employ residents
 - No salary paid to residents

Challenges

CME-CPD:

- Post-soviet format: 2 mth course every 5 years
- CME Institute (KSMIRCME) in charge
- Medical associations not in charge of CME
- Re-certification every 5 years
- Re-certification also linked with salary categories
- CME credit collection





Main partners

- Ministry of Health Ministry of Education
- KSMA: Kyrgyz State Medical Academy
- Osh University school of medicine
- KRSU: Kyrgyz Russian Slavonic University
- KSMIRCME: Kyrgyz State Medical Institute of Retraining and Professional Development
- KMA: Kyrgyz Medical Association
- Medical facilities FMCs
- Regional medical services

Approach to change

- Systemic change Governance
 - Strategies to change regulations
 - Leading role of the MoH
 - More sustainable
 - Creation of a working group with all stakeholders
 - Financial and technical support of the project
 - Coordinated role of SDC and donors (SWAP)
 - Building trust and competencies
 - Bring issues to higher level (Gvt representatives)
 - Roundtables
 - Constant follow-up and renewed commitment

Approach to change

- Pilot technical hands on programs
 - To build concrete experience
 - Identify difficulties and opportunities
 - Feed the governance level with issues and possible solutions
 - Identify stakeholders who have experience but no voice
 - Include them in the high level discussions

Approach to change

CME-CPD:

- Diversify Types of CME
 - E-learning courses
 - Peer Review Groups
 - Give credits for these new types of CME
- Increasing role given to medical associations
- New CME strategy regulations
- New credit collection strategy regulations
- Applying the strategy and regulations!
- From theory to practice...

