

EDITORIAL

Integration of Medical Education and Health Services Meets Accountability Challenges and Excellence of Education?

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It is now over 25 years that medical education has been integrated with health services in Iran to meet the world health organization proposed "Health for All" Policy as well as challenges of social accountability (1). This integration was supposed to increase quality, accessibility, equity and cost benefit for services as well as responsiveness of medical education (2). In this process, Mashad University of Medical Sciences has taken steps to establish the first Educational Health centre to further adopt education of health professionals according to their future social accountability commitments (3).

Many organizational determinants have changed in the past decades. Medical research, for instance, has been nested, internalized and even prioritized within the educational system. As a result, recent medical research achievements might have come at the expense of medical education and quality of services. Although excellence of medical education has rarely discussed, effectiveness of this process has been under constant scrutiny and debate in regard to health challenges, where some doubts have been raised; Structural integration was not followed by contextual

synergism of education and services. It has also caused territorial disagreements among both sides. It is argued that not all of the proposed objectives have been achieved. Providing evidence to show responsiveness of integration, which is capable of tackling new health needs and challenges, yet to be confirmed.

A preliminary comparison of different angles related to benefits of integration of education with Ministry of Health or Ministry of Technology and Sciences has been summarized in table 1. We would like to bring together the wide range of opinions in regard to integration. This forum will provide a unique opportunity to foster collaborative comments and related research for clarifying and quantifying the impact of integration of medical education with health services or with ministry of science and technology. In addition, to what extend, introduction of effective and transparent accreditation systems for accountability could be feasible? We would update and expand Table 1 after receiving readers' views. Please send your comments by the end of May 2012 to the editorial office.

Table 1. Comparison of different angles related to benefits of integration of education with Ministry of Health or Ministry of Technology and Sciences.

Integrated with Ministry of	Health	Sciences
Accountability		
Community Responsive Medical Education	+++	+
Community Responsive Medical Research	+++	+
Community Responsive Medical Service	++	+
Professionalism	++	+
Advantages for Medical Education		
Using Health Infrastructures (Buildings, instruments, staffs)	+++	+
Teaching of Basic Sciences	+	++
Teaching of Clinical Sciences including Educational Materials	+++	+
Advantages for Other Educations		
Using Education Infrastructures (buildings, staffs, instruments)	+	++
Integrated Education and Research	+	++
Advantages for Research		
Basic Research	+	++
Applied Research	++	+
Infrastructures (Buildings, instruments, staffs)	+++	+++
Integrated research and Education	++	+++
Advantages for Services		
Quality of Services	+++	+
Cost Benefit & Cost Effectiveness	+++	+
Community Oriented Services	++	+
Equality of Services	++	+
Competency of Future Physicians	+++	+
Others		
Volume of the Challenge (<5% of students are medical students)	---	+
Willingness to Keep the Current Status	++	+

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