raiSe libyAn Higher education heAlth sector for the benefit of local society

SAHA Project

raiSe libyAn Higher education health sector for the benefit of local society

Reference Number: 619002-EPP-1-2020-1-IT-EPPKA2-CBHE-JP KA2 ERASMUS+ CAPACITY BUILDING IN THE FIELD OF HIGHER EDUCATION PROGRAMME

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UNIVERSITÀ DI PAVIA

Cofinanziato dal programma Erasmus+ dell'Unione europea

S A H A

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Call for Proposals 2020 - EAC/A02/2019

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KA2 ERASMUS+ CAPACITY BUILDING IN THE FIELD OF

HIGHER EDUCATION PROGRAMME

D1.1

Update of Need Analysis of health management activities in Libya 30 November 2021

WP1: Report

Unimed | University Of Granada | University Of Wes Bohemia | LIMU | University Of Sirte | University Of Tripoli | University Of Zawia | University Of Misurata | University Of SEBHA

This report is carried out as result of WP1 activities of the Erasmus+ SAHA project

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Overview of the Erasmus+ SAHA Project

The Erasmus+ CBHE SAHA project emerged as a result of the unfortunate fact that the Health management capacity in Libya is reportedly weak, with the shortage of management and admin staff, evident lack of trained health personnel, inadequate ICT infrastructure, equipment and resources for scientific research and training, poor capacity building training programs, lack of reliable data and stored data at local and national level, low quality assurance, inadequate teaching methodologies, tools and assessment methods, rare international exposure of teaching staff.

Therefore, the SAHA project mainly aims at reforming the whole health system in Libya by involving the local Higher Education Institutions. In doing this, the project sets its three main objectives of, first, targeting the urgent needs through the capacity building actions for academic staff, by introducing new teaching methodologies, skills and knowledge, and for administrative staff on how to store and manage health data. The particular training fields are; training in information and communication technology, training in English language, training in digital teaching and learning, training in using new ICT technologies to manage the collected health data, training in quality and project management, training in international cooperation management. Second, the setting up and management of academic centres for collecting medical data which will reinforce the reliability of data and statistics related to health management.

Finally, the project aims at introducing new teaching methodologies, which will Raise the quality of the faculty members resulting in the increase of the quality of student's, in addition to the introduction of a well-designed curriculum in Health Economics and Healthcare Management. This curriculum will be implemented in all of the Libyan Partner Universities, composed of a cluster of six courses. Namely, the courses are; Introduction to Health Economics for Healthcare Management, Healthcare management, Health Economics, Business Development, Performance Management, Telemedicine. Worth mentioning here is that the SAHA project aims at creating an advisory multi stakeholder committee for defining policy recommendations for local, regional, national and international stakeholders

and decision-makers, and that the SAHA Capacity Building outcomes will promote the University role in the society by increasing the capacities of current performers in health management, and addressing one great lack affecting Libyan health system performances which is the lack of reliable data and stored data at local and national level through the creation of dedicated centres.

In the same way, SAHA aims at supporting the modernization and internationalization of the Libyan higher education institutions in the field of Health Economics and Healthcare Management. This is best achieved through the enhancement of HEIs human resources capacities, by improving quality, relevance, equity of access, planning, and delivery of training offers and upgrading the quality of the existing courses. As well as promoting the reform process in the field of the Libyan health system by involving national and international stakeholders, HEIs representatives, public authorities.

In order to accomplish the above mentioned objectives, the project is structured as eight main work packages, each one targets specific results and contains a number of tasks and activities to be implemented in order to come up with the required deliverables and outcomes. Thanks to the positive interaction and fruitful cooperation with all the project partners, this report is carried out as a main deliverable of the first Work-package, which will act as the cornerstone for the implementation of the following project activities.

About this Report

This report is aimed at stating clearly the current situation in regards to the Health Management sector in Libya, and in relation to the Higher Education System. It also puts forward the needs of the Libyan Universities that are participating in the SAHA project, to be considered in the way of implementing the following project activities.

The report is designed to contain an update of health management activities in Libya, collecting reliable data through a bibliographic research and a questionnaire that has been virtually distributed to the Libyan partner universities and the medical facilities connected to them. It also lists the medical facilities and health management centres available. In addition, the report presents the main laws and regulations in regards to the Health Management Sector in Libya. Then, the report states the needs of each partner university in regards to the teaching methodology and practices, training and equipment needs.

The SAHA needs analysis will analyse and evaluate:

- The user needs and to assess the actual situation in an in-depth study will be carried out by each one of the Higher Education Institutions (HEI) involved, both in EU and LY, as well as in the European documentation about existing curricula in Post Graduate training in health management and allied disciplines. Further aim of the WP1 will be the analysis of the teaching systems currently adopted in LY and EU Universities, with their relative strengths and weaknesses.

- The actual level of training of the postgraduate medical trainees and to have a clue on the strengths and weaknesses of the actual system of training, the level of theoretical and practical preparation of the trainees will be tested by an external independent scientific body, that will be selected among the most authoritative at European level.

The methods chosen to carry out this report were the use of literature and documentary evidence (bibliographic research) and the use of a survey and interviews during the field research visits with key actors.

- Bibliographic research: A bibliography research has been done with the aim of providing an overview of the forced people movement, the impact upon the host communities and upon the education system, the legal framework of refugee and displaced populations in the involved countries. Please find here below some examples of the utilized sources:
  - United Nations High Commissioner for Refugees (UNHCR)
  - Local sources: for legal and statistical information
  - NGO's and UN reports
- Field research: Collection and analysis of information (qualitative and quantitative) through interviews and the needs analysis survey.

Six universities have participated in the survey:

1. (**UOT**) University of Tripoli
2. (**MU**)Misurata University
3. (**SeU**) Sebha University
4. (**SU**) Sirte University
5. (**ZU**) University of Zawia
6. (**LIMU**) Libyan Intrrnational Medical University.

Overview of the Libyan Health system

According to data already collected during SAHA proposal writing, the Libyan war has inflicted a grave toll on the country's population and public health system. More than 17% of hospitals and 20% of primary health facilities have been damaged or destroyed by the conflict, which broke out in 2011, an assessment by WHO found in 2017.

Health and healthcare are then a major concern areas that draw intense citizen attention and government throughout Libya. Because a healthy population is a prerequisite for economic growth and national healthcare expenditures are increasing fast.

Current and recent Libyan political and military crises are deeply affecting the whole population. The past years conflict caused an increase in health needs for ordinary Libyans and military personnel. The widespread utilization of weapons in the urban environment is directly linked to rising diseases and handicaps (i.e. cancer, infectious diseases, tuberculosis and leishmaniasis, and mutilations). Furthermore, the fragility of the State, central and local administrations, is evidently targeting the efficiency of Libyan healthcare system at the national level and the fully functioning of local Hospitals. The drastic decrease in the performance of the Libyan healthcare system is also obligating many ordinary Libyans and military personnel to access to healthcare abroad (mainly in Tunisia, Turkey, Jordan, and Italy) with a relevant economic cost for State budget and private family budgets in addition to the difficulties of travelling from Libya during the present crisis.

The lack in the health and healthcare system have historical roots in the country as recognized by the World Bank in 2009: "There is a critical need for building a National Health Management Information System. While the establishment of the system may take time and could possibly not be completed in the short term, the necessary policy decisions need to be made and resources allocated to that effect as soon as possible in order to support

the quality-oriented goals and strategies highlighted in the Development Programme".[1]

Additionally, Libyan health information activities are extensive but diffuse, and without effective coordination, this inhibits the effective use of data as inputs to policy development. Good health monitoring and healthcare evaluation practices need to feed into national and regional health policies. Some areas, such as socioeconomic health inequalities and health system performance assessment have been identified as major focal areas for health information improvement, i.e. these areas face a special need for better data and indicators as well as reinforced research capacities

To address rising healthcare problems such as the increasing pressures on the sustainability of health systems, new and more effective health policies are needed. These have to be guided by the best available data, research, and evidence on good practices, effectiveness, and efficiency of systems of healthcare and prevention. Up-to-date and high-quality health data are required to evaluate policies and interventions for their outcomes, costs, and priority-setting, to determine public health system performances and to provide timely monitoring of trends in health. USAID stressed that the "data issue" it is a widespread problem not only in Libya but in the whole North Africa region, assessing that "registries of private providers and facilities exist, they are usually out of date or incomplete, and private sector reporting into the national health management information system is limited"[2]. As recognized by El Oakley in 2013, there is a need to perform a census and establish a robust and comprehensive health workforce database to include numbers, categories and subcategories, skills mix, and qualifications and distribution. This is the reason why SAHA foresees the collection of high-quality national data and a proper storage in dedicated data centers. This action is absolutely in line with the already ongoing efforts of EU, that funded in the past years actions for a total of 4 million EUR in the reform the health

[1] http://documents.worldbank.org/curated/en/627191468055513565/text/450190ESW0v20P0374322B00PUBLIC00PER.txt

[2] https://www.shopsplusproject.org/sites/default/files/resources/Health%20Trends%20in%20the%20Middle%20East%20and%20North%20Africa.pdf

data system so managers can better plan. In addition to that, we can note that in December 2020, the EU-UNDP partnership towards advancing peace, security, human rights and development in Libya has made possible that today 4.7 million people in 29 municipalities across the country have better access to health, education, infrastructure and public services. This partnership has improved municipal and water and sanitation services for over 2 million people. The 16 hospitals and medical facilities rehabilitated, and the equipment provided, including seven ambulances, is giving access to improved healthcare to 3.5 million people in the East, West, and South of Libya.

In line with OCHA 2020 last report, SAHA will support an improved access to, and will raise the quality of, data and analysis strengthening collaboration and capacity building and cooperating on assessment methodologies and information management to ensure understanding of a common humanitarian needs.

As recently recognized by GIZ "The health sector in Libya is fragmented and fragile as a result of the ongoing political crisis. The state-run Primary Health Care Centres (PHCCs), which offer general medical care primarily for people with low incomes or who are in need of support, are unable to maintain adequate levels and quality of the services offered. In addition, there are no specific measures to improve health care access for particularly vulnerable groups, such as those with disabilities or psychosocial disorders. Barriers to access also need to be dismantled for girls, women and migrants, and preventive measures to help people stay healthy need to be promoted".[3] There is a need to introduce the concept of continuous professional development and lifelong learning to maintain skills and competencies and adopt advanced courses in professional knowledge and skills: developing a package of courses to be introduced in the Libyan Universities is the foundation stone for the future of the health management in the country.

[3] https://www.giz.de/projektdaten/projects.action?request_locale=en_GB&pn=201818277

As recognized by Libyan Universities partners of SAHA (A questionnaire was used to obtain information together with several online meetings), there is clear lack in the staff preparation and readiness to work in such conditions, as well as the level of skills is not adequate, the teaching methodologies are old-style and no continuous upgrade of capacities is foreseen.

In a 2010 UNDP paper, it has been clearly recognized that there is a clear a need for an "urgent reform to enhance the capacity and the governance of health management system, establishing solid and credible data-base system, strengthening medical and para-medical staff capacity, shifting from clinical approach to socio-community approach with special focus on preventive actions targeting families, children and youth".[4]

To cope with a such situation, health policies in combination with a strong system of healthcare management, new methodological approaches and innovative technologies are very needed and expected. Universities and Academic hospitals are the most suitable environment to elaborate, discuss, implement and finally achieve these goals. The CBHE can really contribute to improve partners' performance in teaching Health Economics and Healthcare Management thanks to the great flexibility and adaptability of SAHA courses to different academic communities and multiple local needs. In actuality, four Libyan universities out of six need to widely expand their capacity in terms of (1) revising the contents of existing course, (2) introducing new subjects, and (3) undertaking new methodologies. One Libyan university out of six doesn't have any previous experience in teaching Health Economics and Healthcare Management and another one already runs a Master program that is precisely related to this academic field.

It is crucial to note that project feasibility can be also assured by the political, universities and international stakeholders' leadership that is committed to 'higher level' goals. SAHA is indeed framed in the "relatively brief window of opportunity" during which the government and the international community –effectively, the EU, WHO – can have a significant impact on restructuring

[4] https://lib.ohchr.org/HRBodies/UPR/Documents/Session9/LY/UNcontribution_JS.pdf

systems and reformulating policy before these systems and institutions become entrenched and resistant to change. In order to address and face Libyan health challenges, a more participatory approach is then required developing national reform guidelines in collaboration with professional bodies and society, something that will be translated in reality thanks to the SAHA multi stakeholder committee. This committee will be crucial for reducing the "gross disconnect" and "major vacuum" between policy and the medical field.

The tensions between different health authorities have deeply led to delays in making critical decisions about releasing the needed national funds. This is hindering, blocking, and slowing down processes and progress. Nominations of key health positions are subject to agreement by a leading tribe in the area. Many officials lack the technical expertise and experience needed to act in either an advisory or executive public health management capacity. There are no clear lines of areas of geographical control under different parties to the conflict, and the changing administrative map of Libya (districts, municipalities, health regions) has had its impact on the distribution of health infrastructure and its types (no clear information on number of districts, municipalities, general or rural hospitals, polyclinics, PHC clinics, etc.). Even more, the lack of accountability and transparency on the allocation of funds and distribution of medicines, equipment and supplies from national to municipal levels, is a result of the disorganized political authorities.

Despite all supported and provided technical support, there is no country-wide system to collect information and monitor and assess the needs, response capacities and funding requirements, this has led to the absolute lack of population/health data and the lack of data culture.

Likewise, the political decentralization has caused negative impact on continuity of health care services at a municipality level: largely disrupted public health services and limited institutional capacity, resulting in the following:

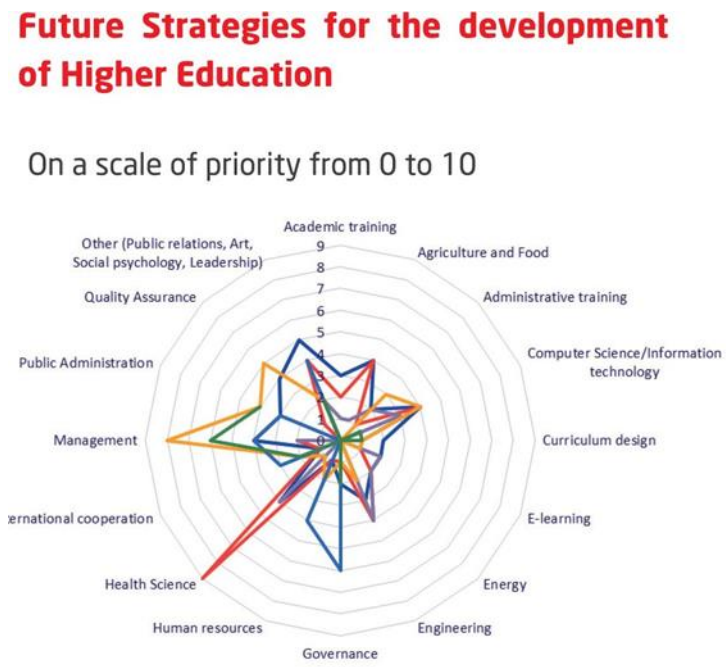
- Critical gaps in disease surveillance (with 131 sentinel sites). Communicable Diseases remain a concern due to the breakdown in services.
- Only 15-20% of communities (666) have services for reproductive health care and non-communicable diseases.
- No clearly defined MCH department at the national and sub- national level results in non-coordinated response for MCH related activities.
- Complete financial dependency on international community for implementing PHC and RMNCH Programs.
- Access to public health facilities to diagnostic, treatment and follow for large segments of non-documented people, migrants, refugees differs across the country (in some parts access is reported, in others no access).
- No notion of nutrition: (wasting, micro-nutrition deficiencies). Classic double burden country.

Needs analysis and assessment of Higher Education Health sector in Libya

General overview of the Libyan Health Management curricula at Libyan Higher Education Institutions

When asked about their future strategies for developing the new capacities of academic and administrative staff, the absolute majority of Libyan Universities described the health sector as the main topic to be addressed.

This result was already anticipated in a UNIMED study called Libya restart[5]. When asked about future strategies for the development of local HEIs, Libyan institutions replies as follows by indicating health sciences as their top priority:



By focusing on the reform and upgrade of the higher education system with

[5] For the Libya restart full report and executive summary, please have a look here: https://www.uni-med.net/libya-restart-a-journey-analysis/

a special and peculiar focus on health management, SAHA project will then explicitly follow the indication coming from the European Union and the Libyan government. In 2017, 5-6 April (Tunis), these two entities both agreed on concrete steps to enhance cooperation on two priority sectors for the Libyan people, health and higher education, at a Libya-EU Interministerial Meeting held on.

By addressing Universities, SAHA wants to determine a long term impact on the HE system as well as on the society at large. This last point is of fundamental importance while addressing a top priority such as the one of health in Libya with a particular focus on Higher education. SAHA project is aimed to offer a well designed curriculum in Health Economics and Healthcare Management. The curriculum will be implemented in each university partner and will be composed of a cluster of 6 courses, to be located in different Departments/Faculties and to be eligible, mainly, for Medicine and Health Public students.

Since the construction of a curricular project constitutes a process of meditation and decision-taking which will finally determine the quality of professional preparation of the trainees involved, "ad hoc" questionnaires for the survey of user needs have been created. These questionnaires allow the collection of information on the vision and needs and constraints, strengths and weaknesses, of the different actors involved (e.g., academic staff, teachers, students, medical facilities).

Below is a summary of the results of section B, "Information on the University's teaching System in the Field of HM", of the questionnaire.

1. General information about the institution:

Number of undergraduate and postgraduate students in the University	
University of Tripoli	undergraduates: 69723 postgraduates: 724
Misurata University	undergraduates: 16.358 postgraduates: 1.040

Sebha University	12.423
Sirte University	undergraduates: 7.500 postgraduates: 500
Zawia University	undergraduates: (25.742) postgraduates: (1.181)
LIMU	1.500

Number of academic staff in the University	
University of Tripoli	Academic Staff 3848 Teaching assisstants 1959
Misurata University	1.260
Sebha University	1.417
Sirte University	578
Zawia University	1.837
LIMU	250

Number of undergraduate and postgraduate programs in the University	
University of Tripoli	Undergraduate programs: 149 Master programs: 106 PHD: 12
Misurata University	Undergraduate programs: 94 Master programs: 14
Sebha University	114 programs
Sirte University	Undergraduate programs: 14 Master programs: 5
Zawia University	Undergraduate programs: 130 Master programs: 20 PHD: 10 Undergraduate programs: 1. 9 programs in which Health Management is taught as "general course" (Zawia Medical Technology Center) 2. 3 courses: Health Administration + Primary Health Care + Health Economics (Dep. of Public Health, College of Medical technology) 3. 5 programs in which Health Management is taught as "general course" for first-year students + Health Administration (College of Public Health in Al-Ajilat) 4. Module in Community and Public Health (fourth-year students in Medicine
LIMU	12

Language/s of instruction used at the University				
Language	**Arabic**	**English**	**French**	**Italian**
University of Tripoli	X	X	X	X
Misurata University	X	X		
Sebha University	X	X		
Sirte University	X	X		
Zawia University	X	X		
LIMU		X		

Any ongoing or future projects that your University is working on in the

field of Health Management (other than SAHA)	
University of Tripoli	None
Misurata University	Only E+ Saha
Sebha University	None
Sirte University	Yes
Zawia University	None
LIMU	Starting a postgraduate program in the field of health administration upon obtaining the approval of the Ministry of Education and the Quality Assurance Center

Any ongoing or future collaborations with local/regional/international stakeholders that your University is working on in the field of Health/Health Management?	
University of Tripoli	Cooperation with - Primary health care centers for undergraduate students training. - Teaching Hospitals - CDC - Medical Manpower Development Center - Biotechnology Research Center - The National Commission for Research, Analysis, and Genetic Imprinting.
Misurata University	Cooperation agreements for training programs/internship programs, with: - The Cancer institute in Misurata - Misurata Medical Centre - The Administration of Health Services in Misurata
Sebha University	None
Sirte University	Yes
Zawia University	Collaboration with: -Primary Health Care Center at Zawia for undergraduate teaching - Zawia Teaching Hospital for training - the Infectious and Disease Control Unit at Zawia - the Libyan National Center for Medical Research Cooperation and Units of Diabetes, Endocrinology and KidneyCenter. Also, the Social Services Unit for Special Cases
LIMU	Collaboration with some medical facilities within Benghazi city

Number of medical facilities associated with the University	
University of Tripoli	10→ University hospital and 9 Academic hospitals 2 Dispensaries - 1 UOT dispensary -1 Faculty of Medicine dispensary
Misurata University	2 → Misurata Medical Centre + Misurata Cancer Institute
Sebha University	1 → Sebha Medical Center
Sirte University	2 → Ibn Sina Teaching Hospital + Dental Teaching Clinic
Zawia University	8 → one teaching hospital + 7 Health centers in various specialties
LIMU	1 (mainly) + cooperation (as stated above)

2. Describe the current teaching program in the field of Health Management at your University: Department name and location, number and name of courses, number of professors involved, students enrolled, strengths, weaknesses and opportunities:

University of Tripoli	Faculty of Medicin Health management subjects in Community departement - Health Care System CM341 - Quality Management CM341 - Health System in Libya CM341 - Data Collection CM341 - Occupational Health CM442 - Travelers Medicine CM442 - International Health CM442 - Health Education CM442 Number of professors involved 3 Students enrolled in 7th semester for CM341 = 586 student Students enrolled in 8th semester for CM442 = 530 student Medical Ethics in Forensic departement Number of professors involved 4 All students enrolled in 8th semester for FT440 = 530 student Clinical Skill department Number of professors involved 5 Students enrolled in 5th semester for CS211= 551 student Students enrolled in 6th semester for CS312= 465 student Students enrolled in 7th semester for CS 313= 529 student Strength: very attractive and successful using simulation for training Weakness : high students number Faculty of Medical Technology

	Department of Public Health Number of students enrolled 500 Faculty Of Nursing Basic Nursing department Health education 73 student Nursing leadership management 87 student Health assessment 60 student Strength: - All graduated students will carry information about health management - All professors involved are teaching in the nearby faculties Weakness: - unstructured courses (many subjects in different courses) Opportunity: - Providing basic knowledge for postgraduate degree in health management
Misurata University	**Faculty of Nursing and Health Science** No distinct department, the Health Management courses are taught throughout the Faculty. Structure: bachelor degree (taught in English, two closed semesters per year, each semester lasts 14 weeks maximum + two weeks for the exams). Courses: 7 - Medical Ethics - Health Care System - Occupational Health - Travelers and International Health - Health Education - Total quality Management - Nursing Leadership and Management Professors involved: 2 (Associate professor + lecturer) Students enrolled: about 250 (academic year 2020-2021) Strengths: attrattive job market. The College is strategically located in the centre. Attractive to students. Weaknesses: lack of faculty and laboratories
Sebha University	**None.**
Sirte University	**Faculty of Medicine** **Community Medicine Department** Professors involved: 1 Students enrolled: 40 **Faculty of Dentist** **Community Dental Department -** Professors involved: 1 Students enrolled: 30 Missing data (courses, strengths, weaknesses and opportunities)
	FACULTY OF ECONOMIC Health Managment programsCourses:47 General University Requirement GUR

- Arabic Language
- English Language
- History and Civilization
- Computer Science

General University Requirement GUR

Principles of Mathematics
Principles of Law
Principles of Civil law
Principles of Commercial lawPrinciples of Economic Principles of Accounting Principles of Management Principles of Politics Principles of Ensurance Principles of Statistics Research and Methodology

General University Requirement GUR

Principles of Marketing
Principles of Production Managment
Principles of Human Resources Managment HRM
Inventoy Purchase Managment
Strategic Managment
Information System
Managment Information System MISPrinciples of Microeconomic
International Managment
Total Qaulity Managment

Elective courses

-
- Libyan Healthcare System
- Entrepreneurship
- Management of Healthcare Institutions
- Strategic Management
- Essentials of Medical Law
- Introduction to Basic Medical Sciences
- Health & Society
- Advanced Research Methods
- Toatal Qaulity in Healthcare
- **Major but not essential:**
- Banks and carens
- Investment Managment

Credit hours**:** 120
Professors involved: 7
Students: 30

Objective of the courses

Providing student with adequate knowledge related to heathcare systemsSupprting local market with skilled staff

Strengths:

The novelty of the program design as it was based on internationalstandards.
Suitability of the program to the needs of local and international

	markets.Highly qualified staff members. Heavy reliance on active learning strategies. Focus of educational process on real-world practices.Weaknesses: 1. The lack of teaching sources **Threats:** 1. General instability of external environmental factors might have negative effects on the strategic planning of this major. **Opportunities:** The opening of new clinics can offer new employment for the graduate students
Zawia University	**College of Medical Technology, Zawia** Course Name: **Health Administration (MT203)** Professors involved: 3 specialising in health administration Students enrolled: about 288 (Academic year 2020-2021) General course given to second-year students in the following departments: - Dep. of Physical Therapy and Sports Rehabilitation - Dep. of Anaesthesia and Intensive Care - Dep. of Dental Technology - Dep. og Medical Laboratories - Dep. of Diagnostic and Therapeutic Radiology - Dep. of Medical Engineering - Dep. of Medical Nutrition - Dep. of Health Society - Nursing and Midwifery Department Course name: **Primary Health Care (PH305)** Course given to third-year students, Dep. of Community Health New Department: no third-year students for this Academic year Course name: **Health Economics (PH406)** Course given to fourth-year students, Dep. of Community Health **College of Public Health, al-Ajilat** Courses name: - **Health Nutrition** - **Healthy Environment** Taught in the following departments: - Dep. of Family and Community Health - Dep. of Inspection and Health Education - Dep. of Health Administration (new department → data not available) missing data (numbers) **Faculty of Medicine** course name: one lecture of 2 hours as a part of Community and Public Health module Community Health includes (Medical Ethics, Healthcare System, Occupational Health, Travelers and International Health, Health Education,Health Maangement, Biostatisitcs, Total Quality Management, Primary Care and Family Medicine) Given to fourth-year undergraduate students in Health Management200 students (2020-2021) Strengths: presence of the Academic staff + qualified Academic staff (they may need training and skills development) Weaknesses:

	- no practical aspects - courses are theoretical and taught only in classes (they are considered "general courses" - lack of organisation and implementation of the field program according the the educational program - no connection with the job market - no development in scientific and technological fields (opportunities) - Providing basic knowledge in healthcare management forundergraduate and postgraduate students. - Playing a central and decisive role in developing curricula andcourses in healthcare management.
LIMU	**College of Business Administration** **Health Management Program** Courses: 47 Names: **General University Requirement GUR** - Arabic Language - English Language - Introduction to Research Methods - Business Ethics - Interpersonal Communication IC - Introduction to Statistics - Critical Thinking **Free Courses FC** - Languages - History - Philosophy - Psychology - Sociology - Geography - Arts **Compulsory Unspecialized Courses CUC** - Information Technology - Academic Writing - Introduction to Law - Commercial Law - Reading Skills SPSS **Compulsory Related Courses CRC** - Principles of Management - Principles of Marketing - Human Resource Management - Consumer Behaviour - Supply Chain Management & Logistics - Principles of Microeconomics - Principles of Macroeconomics - Principles of Accounting - Financial Management - Banks Management - Math for Business - Principles of Political Sciences - Principles of Public Administration - Operations Management - Operations Research - Management Information Systems - Electronic Business

Compulsory Specialized Courses CSC

- Medical Terminologies
- Essentials of Nutrition
- Essentials of Nursing
- Libyan Healthcare System
- Entrepreneurship
- Management of Healthcare Institutions
- Strategic Management
- Essentials of Medical Law
- Introduction to Basic Medical Sciences
- Health & Society
- Advanced Research Methods
- Contemporary Issues

Credit hours: 128
Professors involved: 6
Students enrolled: 5
Objectives of the courses: providing the necessary knowledge for managers of health facilities in the Libyan health system at its three levels.
The University selects and recruits faculty members with required competencies, qualifications and experience, to be specialized in the field of health administration.

Strengths:

1. The novelty of the program design as it was based on international standards.
2. Suitability of the program to the needs of the local and international markets.
3. Highly qualified staff members.
4. The heavily reliance on active learning strategies.
5. The focus of the educational process on real-world practices.

Weaknesses:

1. The insufficiency of permanent teaching staff as members.
2. The lack of paper-based library.
3. The weaknesses of English language fluency for the students.
4. Weak marketing efforts to promote this programme at a large scale.

Threats:

1. There is a kind of reluctance from the students to enroll in this major. Hence, the enrolled number of students is below the planned number.
2. Unstable external environmental factors might have negative effects on the strategic planning of this specialty.

Opportunities:

Given the recent great transformations in the Libyan economy, and the increase in investments in the private healthcare sector, this matter has widely opened the door for increasing the demand for healthcare people and specialists, especially those who have the knowledge, skills and English language. Those requirements are greatly exist in this specific programme.

3. Describe the current credit system used for the current Health management teaching program in your University (lessons, internship, lab., etc.). Also, describe the foreseen credit system for the new SAHA curriculum:

University of Tripoli	The current lessons and subjects in the mentioned courses are among the courses credits CM341 4 credits CM442 4 credits FT440 4 credits CS211 1 credit CS312 1 credit CS313 1 credit -Health education credits (1theoretical &2 practical hours/wk) -Nursing leadership management 2 credits - Health assessment 2 credits
Misurata University	New program; no program dealing with health managemnet. However the proposal for for integrating the SAHA project is under process at the moment.
Sebha University	The establishing of new programe with the coloberation with SAHA partners (MSc in Health managment).
Sirte University	Does not exist missing data (foreseen credit system SAHA)
Zawia University	Health Administration (MT203) - 1 theoretical hour per week - no practical hours - 2 units Primary Health Care (PH305) - 2 theoretical hours per week - 2 practical hours per week - 5 units - third-year students - Dep. of Public Health Health Economics (PH406) - 2 theoretical hours per week - 2 practical hours per week - 5 units - fourth-year students - Dep. of Public Health **Community and family medicine** For 4th year medical student (6 week course) 200 total points (using percentage system for the evaluation) Pass percentages 60% Medterm exam 20% Final exam 40% Practical exam 20% Oral exam 20% A new branch will be opened in the Master's programme in the Department of Management, which holds the accreditation, under the name of Master of Health Administration in the Faculty of Economics. Some courses will be added, as well as those of the Health Project.

	Students obtain a Bachelor degree (Master's) in Administration, Division of Health Administration, with one of the following two options: 1. Successfully passing the academic courses (30) units and with a cumulative average of no less than (3) out of (4) points. A letter was prepared and accepted by the scientific committee, and it is calculated as the equivalent of (6) units. 2. Successfully passing the basic academic courses by (30) units and with a cumulative average of no less than (3) out of (4) points. Then pass the additional academic courses - instead of a letter - by (15) hours successfully and with a cumulative average of no less than (3) units out of (4) points. Addition in the Arabic version - new SAHA credit system (to be discussed with Saha partners) - total credit 120 - 15 - 20 units for each course 1. Introduction to Health Economics for Healthcare Management 2. Healthcare Management 3. Health Economics 4. Business Development 5. Performance Management 6. Telemedicine
LIMU	Credit hours: 128 Number of Modules = 45 + Graduation Project = 4 Hours Arabic Language 2h. English Language 2h. Introduction to Research Methods 2h. Business Ethics 2h. Interpersonal Communication IC 2h. Introduction to Statistics 2h. Critical Thinking 2h. Total= 14 Hours Information Technology 3h. Academic Writing 3h. Introduction to Law 3h. Commercial Law 3h. Reading Skills 2h. SPSS 2h. Total= 16 hours. Principles of Management 3h. Principles of Marketing 4h. Human Resource Management 3h. Consumer Behaviour 3h. Supply Chain Management & Logistics 3h. Principles of Microeconomics 3h. Principles of Macroeconomics 3h. Principles of Accounting 3h. Financial Management 4h. Banks Management 4h. Math for Business 3h. Principles of Political Sciences 2h. Principles of Public Administration 3h. Operations Management 3h.

	Operations Research 4h. Management Information Systems 3h. Electronic Business 3h. Total = 54 hours. Medical Terminologies 3h. Essentials of Nutrition 3h. Essentials of Nursing 3h. Libyan Healthcare System 4h. Entrepreneurship 3h. Management of Healthcare Institutions 3h. Strategic Management 4h. Essentials of Medical Law 3h. Introduction to Basic Medical Sciences 3h. Health & Society 3h. Advanced Research Methods 4h. Contemporary Issues 4h. Total = 40

4. What are the main challenges for the establishment of SAHA Curriculum in Health Management at your University?

University of Tripoli	- Postgradute degree in Health Management that has no equivalent bachelor degree. - Overlaping of courses between Faculty of Medicine and Faculty of Economy and Political Sience. - Academic staff from different Depatrtments are involved - Approval of the Department
Misurata University	- Approval and accreditation processes - Location for the new curriculum for each Libyan partner institution
Sebha University	- Need for trained staff
Sirte University	- Need for high qualified staff - Need for infrastructural facilities (Lab., digitized system…) - Financial support
Zawia University	- Need for academic programs (the existing ones have weaknesses) - Hospitals that are linked to the university belong to Ministry of Health, but the University belongs to the Ministry of Higher Education - Lack of trained and highly qualified teaching staff in health management and economy. - The needs for optimal use of technology and infrasracture facilities. - External factors such as legal system and regulations.
LIMU	- no major challenges/obstacles (apart from those that could be caused by external factors i.e. surrounding environment, legal and economic systems, country regulation)

5. Describe the accreditation procedure followed at your University and requirements needed for the establishment of the new SAHA curriculum:

University of Tripoli	Procedure: 1. Establishment of a health management department for a master degree. 2. Preparation of the curriculum of master's degree in health management by the assigned team 3. Approval of the master program from the Higher study office in the Faculty of Medicine. 4. Presenting and approval of the master degree program by the faculty council 5. Approval of the master program from the Higher Studies and training Administration 6. Referral of the approved program to the university council for accreditation 7. Accreditation by the Ministry of Higher education Requirements 1. Academic staff training (TOT) 2. Equipping a laboratory for health data collection 3. Training staff for data collection softwear programs 4. Internt network System for data collection
Misurata University	Procedure: 1. Accreditation by the scientific department 2. Accreditation by the University's board Requirements: 1. documents: (courses description, full proposal…)
Sebha University	Procedure: 1. Approval by the department board 2. Approval and accreditation by the faculty board 3. other approval required: University board + Higher Educational Ministry
Sirte University	Procedure: 1. Permission from Ministry of Higher Education and President of the University Requirements: 1. Staff training 2. Digital equipment 3. Systems for data collection and data exchange 4. Financial support
Zawia University	Procedure: 1. Accreditation by the scientific committees and the University Board 2. Coordination with the Centre for Quality Assurance and Accreditation of Educational and Training Institutions 3. University's correspondence with the Ministry of Higher Education Requirements: 1. Teaching and learning resources and facilities

	2. Equipment 3. Faculty administrators and technicians 4. List of course descriptions
LIMU	Procedure: accreditation implemented according to the National Center for Quality Assurance and Accreditation of Educational & Training Institutions, manual and forms used. Institutional body involved in the procedure: - University's Quality Assurance Office - Health Administration Department Reqquirements: 1. The application should possess a BSc Degree or equivalent in business-related / medical-related disciplines with average grade point of Good (65%) awarded by a recognised and accredited national / international higher education institution. 2. The applicant should provide English Language Proficiency certificate. 3. Full attendance and participation in all academic / practical workshops planned for the programme. The applicant MUST attend (4) workshops during the period of study. 4. The scientific committee will assess the applicant's previous background (specialty, transcripts, grades…etc), and decide on the required supplementary courses (foundational courses) needed to bridging the educational gap, and prepare the student to start his MSc programme. The maximum of foundational courses is (8) courses.

General Overview

From a general point of view, the answers to the questionnaire highlight some points in common with most of the universities, as well as some needs. A relevant point is, without doubt, the network of medical facilities linked to the various universities. The total number of medical facilities associated with the universities is 21 + all the teaching hospitals in Tripoli.

As far as health management programmes are concerned, in most cases they are in the form of single courses and/or included in other bigger courses and faculties. Only in three cases out of six (UoT, SeU, LIMU),) do they exist as autonomous programmes or departments.

Except for UoT, ZU and LIMU, there is a lack of information on the credit system envisaged for the new SAHA curriculum.

The accreditation of the courses, in each University, foresees several steps of approval that include, in most cases, the dialogue and the correspondence with the Libyan Ministry of Higher Education. Therefore, for the new Saha curriculum, several steps will be necessary to obtain accreditation and it will be equally important to prepare detailed documentation.

Below is a general list of the needs, constraints and weaknesses that emerged from the questionnaire and a more detailed analysis of the individual universities:

Needs:

1. Choosing a location for the new SAHA curriculum implementation (UoT)
2. Trained and qualified staff (SeU, SU)
3. Infrastructural facilities (SU)
4. Financial support (SU, SeU)
5. Digital equipment (SU, SeU)
6. System for data collection and data exchange (SU)
7. Academic programmes (the existing ones have weaknesses) (ZU)
8. Compatibility with the job market (ZU)
9. Better knowledge management (ZU)
10. Optimal use of technology (ZU)
11. Stronger governance (ZU)
12. Supportive and technical devices (ZU)

Constraints/weaknesses:

1. Lack of a faculty and of laboratories (MU, SeU)
2. Courses are only theoretical without practical aspects (ZU)
3. Lack of organisation and implementation of the field programme (ZU)
4. No development in scientific and technological fields (ZU)

University of Tripoli

UoT reports the exact numbers of students, staff, and programs, as follows: 69.723 undergraduates, 724 postgraduates, 3.848 academic staff, 1.959 Teaching assistants, 149 undergraduate programs, 106 Master programs, 12 Ph.D Courses.

Teaching Languages: Arabic, English, French, and Italian.

UoT did not provide data concerning any ongoing future project (other than SAHA) in the field of Health Management. It provides informatiion concerning ongoing or future collaboration with local/regional/international stakeholders as follows: Cooperation with, primary healthcare centers for undergraduate students training, teaching hospitals, CDC, Medical Manpower Development Center, Biotechnology Research Center, The National Commission for Research, Analysis, and Genetic Imprinting.

A strong point is the number of medical facilities associated with the University. In fact, Tripoli has connections 10 University hospitals and 9 academic hospitals and 2 dispensaries (1 UoT dispensary and 1 Faculty of Medicine dispensary).

A very detailed explanation of the courses is given (see table), as well as for the credit system (see table). Tripoli refers to its strengths, as attractive and successful use of simulation for training, knowledge in Health Management to its students, and the fact that all professors involved are teaching in the nearby faculties. However, the high number of students and the lack of structure for the courses represent points of weakness.

As opportunities, Tripoli refers: “Providing basic knowledge for postgraduate degree in health management”.

Different challenges are indicated:

- Postgradute degree in Health Management which has no equivalent bachelor degree.
- Overlapping of courses between Faculty of Medicine, Faculty of Economy and Political Sience.
- Academic staff from different Depatrtments are involved
- Approval of the department

Concerning the accreditation procedures, different steps are needed (see table).

Needs and constraints:

Needs:

1. Academic staff training (TOT)
2. Equipping a laboratory for health data collection
3. Training staff for data collection softwear programs
4. Internt network System for data collection
5. Choosing a place (e.g., Medicine College) where to implement the new SAHA CV is emphasized several times.

Misurata University

MU reports the exact numbers of students, staff, and programmes, as follows:

16.358 undergraduates, 1.040 postgraduates, 1.260 staff, 94 undergraduate programmes, and 14 master programmes.

Languages: Arabic, and English.

The University does not have, apart from SAHA, any further projects in the field of Health Management. However, it can count on the collaboration and the cooperation with three main centres: The Cancer Institute in Misurata, the Misurata Medical Centre, and the Administration of Health Services in Misurata. The first two are the medical facilities associated with the University.

It is important to underline that, concerning the current teaching program in the Field of Health Management, a distinct department does not exist. The courses (7) are taught in different departments (see table).

MU refers to its strengths, as the attractive job market and the strategic geographical position of the University, situated in the city centre. However, the lack of faculties/departments and laboratories represents a strong weakness.

Two main general challenges for the establishment of SAHA CV are reported:

- Approval and accreditation processes

- Location for the new CV for each Libyan partner

The accreditation procedure foresees the approval by the scientific department, and by the University's board.

Needs and constraints:

No needs or constraints are clearly specified, apart from the lack of a faculty and of laboratories.

Sebha University

SeU reports the exact numbers of students, staff, and programs, as follows: 12.423 undergraduates/postgraduates, 1.417 staff, and 114 undergraduate and master programmes.

Languages: Arabic, and English.

The University does not have, apart from SAHA, any further project in the field of Health Management, nor collaboration with local/regional/international stakeholders.

The Sebha Medical Centre is the only medical facility associated with the University.

The University does not provide precise information concerning the current teaching program, but it reports the existence of a Department of Health Management in the Faculty of Commerce and Political Science. No credit system is reported.

As main challenge for the establishment of SAHA curriculum, Sebha reports the need for trained staff.

The accreditation procedure foresees the approval by the Department Board, the Faculty Board, the University Board and the Ministry of Higher Education.

Needs and constraints:

Needs: : Trained and qualified staff.
Program to be approved.
Financial support.

Sirte University

SU reports the exact numbers of students, staff, and programmes, as follows:

7.500 undergraduates, 500 postgraduates, 578 staff, 14 undergraduate programmes, and 5 master programmes.

Languages: Arabic, and English.

SU has other projects working in the field of HM, as well as collaborations with local/regional/international stakeholders, but iy does not report ancillary data on these aspects.

Sirte is associated with two medical facilities, namely: Ibn Sina Teaching Hospital and Dental Teaching Clinic.

The University refers to the existence of 2 Departments (Community Medicine Department – 1 professor involved and 40 students enrolled, and Community Dental Department – 1 professor and 30 students). However, it does not refer any strenghts, waknesses or opportunities. No credit system is reported.

The accreditation procedure foresees the permission from the Ministry of Higher Education and President of the University.

Needs and constraints:

Needs: High qualified staff, Infrastructural facilities (laboratories, digitized system…), Financial support, Digital equipment , System for data collection and data exchange.

Zawia University

ZU reports the exact numbers of students as follows:

25,742 undergraduates, 1063 postgraduates, and 130 undergraduate programmes, 20 master programmes and 10 PhD programmes. The number of academic staff is 1837, and the number of programmes is divided into different centres/colleges. In general, Health Management, Health Administration, Health Economics, and Primary Health Care are taught in the form of "courses", or "modules".

Languages: Arabic and English.

The University does not have, apart from SAHA, any further project in the field of Health Management or collaboration with local/regional/international stakeholders.

A strong point is the number of medical facilities (8) associated with the University: 1 teaching hospital + 7 health centres.

A very detailed explanation of the courses is given (see table). Strengths reported by the University are the active presence and the qualification of the academic staff, even if it may need training and skills development.

Some weaknesses are reported:

- The courses are mainly theoretical, taught in classes, with a lack of practical aspects. They are "general courses".
- There is a lack of organisation and implementation of the field programme.
- There is no development in scientific and technological fields.

A detailed explanation of the credit system is given (see table).

The accreditation procedure foresees coordination with the Centre for Quality Assurance and Accreditation of Educational and Training Institutions, plus the University's correspondence with the Ministry of Higher Education.

Needs and constraints:

Needs: Academic programs (the existing ones have weaknesses), Compatibility with the job market, Better knowledge management, Optimal use of technology, Stronger governance, Supportive and technical devices.

Weaknesses: The courses are only theoretical without practical aspects, Lack of organisation and implementation of the field program, No development in scientific and technological fields.

Libyan International Medical University

LIMU reports the exact numbers of students, staff, and programs, as follows: 1.500 (undergraduates and postgraduates), 250 (staff), 12 (undergraduate and master programs).

Languages: English.

Apart from SAHA, LIMU is going to start a postgraduate program in the field of Health Administration upon obtaining the approval of the Ministry of Education and the Quality Assurance Centre. Moreover, it has a collaboration with some medical facilities in Benghazi.

LIMU is associated with one medical facility.

It has a Health Management Program with a credit hour system (details in the table).

LIMU refers differents strenghts, weaknesses, threaths and opportunities (see the table).

The accreditation should be implemented according to the National Center for Quality Assurance and Accreditation of Educational & Training Institutions, manual and forms used.

Institutional body involved in the procedure:

- University's Quality Assurance Office
- Health Administration Department

In this sense, LIMU refers some detailed requirements (see table).

Needs and constraints:

No needs or constraints are clearly specified, apart from the obstacles that should be caused by external factors.

Conclusion

On the basis of the results of "section b", some general conclusions about the needs of the Universities can be drawn. These have to be taken into account for the creation, and implementation, of the new SAHA curriculum.

As said, a strong point is represented by the collaboration and association between the Universities and several Medical facilities.

With regard to the content and from an administrative point of view, it is necessary to work on the credit system of the new curriculum, and on the accreditation procedure. The latter, in fact, presupposes several and numerous steps. The dialogue with the Ministry of Higher Education should be taken into strict consideration.

From a technical point of view, in order to ensure adequate preparation, and usability, there are some needs, constraints and structural weaknesses that need to be addressed:

- Adequate preparation and training of high qualified Academic Staff.
- Creation of a program based on both theoretical and practical hours.
- Provision of adequate supportive and technical devices, digital equipment.
- Creation of laboratories and courses "ad hoc".
- Link with the local job market, in order to create attractiveness for students.
- In some cases, the need for better knowledge management, and stronger governance, emerges.
- Financial support.

Actions to be taken for WP2

1) Regarding curricula, Universities will locate the new six courses package in the following Faculties

Tripoli	**New (to be accredited) Master in Health Management at the Faculty of Health and Medicine**
Sirte	**Upgrade existing Master of Business Administration, Faculty of Economics**
Misurata	**Upgrade Master of Business Administration, Faculty of Economics, and make course available/compulsory forstudents at the Faculty of Nursing and Health science**
Sebha	**New (to be accredited) Master in Health Management at the Faculty of Health and Medicine**
LIMU	**College of Business Administration** **Upgrade Master of Healthcare Management**
Zawia	**Upgrade of Master of Business Administration, Faculty of Economics and the new six courses package as compulsory courses for both Faculty of Health and Medicine and Faculty of economics**

2) On the basis of section B results, the training target groups and related numbers will be included in the WP2 action plan as well as selection procedures, topics, criterias for participation and training methodologies.

Appendices

Appendix 1: SAHA WP1 Questionnaie- English

SAHA **raiSe libyAn Higher education heAlth sector for the benefit of local society** Erasmus+ Call for Proposals 2019 – EAC/A03/2018 PROJECT REFERENCE NUMBER: 618491-EPP-1-2020-1-IT-EPPKA2-CBHE-JP	
Work package number	1
Work package type	Preparation
Title	Needs analysis and assessment of Higher Education Health sector in Libya

This questionnaire is aimed at gathering accurate and reliable data in regards to the current situation of Health Management sector in the Libyan Higher Education Institutions. The questionnaire is designed in four main sections dealing with the main project academic activities and domains, namely, the establishment of six new courses in Health Management in the Libyan Partner Universities, the establishment of Health Data Collection Centre in each of the Libyan Partner Universities, the implementation of the project's training program, and providing the needed technological requirements for the Health Data Centres of each Libyan Partner University. The results of the questionnaire will be carefully analysed to assess the needs, and will highly contribute to the design and structure of the framework of the following project's activities. Thus, we kindly recommend you to answer thoroughly to all of the questions.

The questionnaire is Prepared by:

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Misurata University team for E+ SAHA Project.

Section A: Information about the Medical Facility.

1.	Name of hospital[6].								
2.	Type of hospital.	Rural hospital		Public hospital			Specialty hospital		Medical centre
3.	The hospital has clear vision, mission and goals.	Very high		High		Medium	Low		Very low
4.	Planned bed capacity.								
5.	Working bed capacity								
6.	Number of approved personnel in staffing.	Medical personnel		Medical assistants (including nursing)			Technicians		Administrative
7.	Number of current working personnel in staffing.	Medical personnel		Medical assistants (including nursing)			Technicians		Administrative

[6] If there are more hospitals related to the HEI filling the survey please complete SECTION A per each one of them

8.	Current state of the health institution.	Fully functional	Partially working		Not working at all	
9.	The university linked to the hospital.					
The work of the Medical Departments						
10.	The mechanism used to collect files from the medical departments to the documentation and medical statistics department after the patient is discharged.	Daily	Weekly	Fortnightly	Monthly	Others
11.	The medical department has a dedicated software to collect data.	YES			NO	
12.	If the answer above is YES, which software is utilised?	Locally made	Commercial: (*please add the name of the software*)		Other options:	
13.	Can the utilised software exchange data outside the local system?	YES	Only partially		NO	Don't know
14.	Doctors write the diagnosis (both primary and secondary) according to the 10th edition of the International Classification of Diseases - ICD-10.	100%	61-99%	40-60%	20-39%	< 20%
15.	Doctors working in the medical departments complete all data related to the diagnosis and treatment procedures that are delivered to the patient in the hospital.	100%	61-99%	40-60%	20-39%	< 20%

16.	The medical department reviews and completes all of the data inside the medical file before transferring it to the documentation and statistics department.	100%	61-99%	40-60%	20-39%	< 20%
17.	Doctors are regularly trained on the International Classification of Diseases ICD-10, inside the hospital.	Very high	High	Medium	Low	Very low
18.	Each medical department or unit of a medical department has a medical records technician.	100%	61-99%	40-60%	20-39%	< 20%
19.	The position of a medical records technician in the medical departments is filled by persons with scientific qualifications, technical competence and the needed skills to deal with medical files.	YES	Only partially		NO	
20.	The technical requirements and equipment needed for entering the patient data electronically are available in the medical departments.	100%	61-99%	40-60%	20-39%	< 20%
21.	Doctors working in medical departments enter patient data electronically.	100%	61-99%	40-60%	20-39%	< 20%
22.	The computers in the medical departments are connected with each other through an internal network or over the Internet.	Very high	High	Medium	Low	Very low
23.	The suitability of the place designated for the archive to keep medical files (space – equipment – lighting – ventilation).	Very high	High	Medium	Low	Very low
The work of the department of Health Information (Documentation and statistics- Documentation and information- Medical records- Archive)						
24.	Is there, in the organizational structure, a department or administration that works on health information systems?	Yes		No		

25.	What is the name of that department?					
26.	There are clear tasks and functions of the department.	Very high	High	Medium	Low	Very low
27.	What is the affiliation of this department/ unit within the administrative structure?	General manager	Assistant manager	Medical affaires	Administrative affaires	others
28.	There is a written guide to the procedures followed on how to use the current system.	YES	Only partially		NO	
29.	The mechanism of the work system inside the department.	Paper work	Electronic work		Both	
30.	The number of workers in this department or unit.	Full-time ( )		Part-time ( )		
31.	The degree of mutuality between the qualification and specialization of the workers within the unit or department and the tasks assigned to them.	Very high	High	Medium	Low	Very low
32.	The degree of accuracy and comprehensiveness of the information provided by the data collection system.	Very high	High	Medium	Low	Very low
33.	How quickly the system responds in providing information?	Very high	High	Medium	Low	Very low
34.	The degree of reliance on the electronic system in storing information.	Very high	High	Medium	Low	Very low
35.	The availability of electronic devices (computers) necessary for the system to work.	Very high	High	Medium	Low	Very low

36.	The availability of a communication network between the medical statistics or documentation unit and the medical departments inside the hospital.	Very high	High	Medium	Low	Very low
37.	The extent to which the organizational structure of the health institution permits the exchange of information with other departments comfortably and easily.	Very high	High	Medium	Low	Very low
38.	Adopting the International Classification of Diseases (ICD-10) in documenting patients' medical records.	100%	61-99%	40-60%	20-39%	< 20%
39.	The current system works with appropriate speed when entering and modifying data.	Very high	High	Medium	Low	Very low
40.	The current system allows preparing reports and information with an appropriate speed.	Very high	High	Medium	Low	Very low
41.	The data generated from the current system can be relied upon.	Very high	High	Medium	Low	Very low
42.	The current system provides comprehensive and accurate information.	Very high	High	Medium	Low	Very low
43.	The current system meets the objectives and requirements set for it.	Very high	High	Medium	Low	Very low
44.	The current system provides the necessary reports in a timely manner for all different administrative levels.	Very high	High	Medium	Low	Very low
45.	The software used enables the current system users to exchange information easily and conveniently.	Very high	High	Medium	Low	Very low
46.	The current system allows more than one recipient to connect simultaneously.	Very high	High	Medium	Low	Very low

47.	The current system uses a computerized network to transmit data and information.	100%	61-99%	40-60%	20-39%	< 20%
48.	The network used is sufficient to complete the required work in a timely manner.	Very high	High	Medium	Low	Very low
49.	The database management and operation systems used by the system have high capacity in terms of (data storage – recovery – deletion – printing and display).	Very high	High	Medium	Low	Very low
50.	The current system keeps pace with the changes taking place.	Very high	High	Medium	Low	Very low
51.	The data extracted from the current system is valid and reliable.	Very high	High	Medium	Low	Very low
52.	The data of the current system matches to the actual reality.	Very high	High	Medium	Low	Very low
53.	The current system can provide only the primary information and exclude secondary information.	Very high	High	Medium	Low	Very low
54.	There are elements of confidentiality for access to information in the current system.	Very high	High	Medium	Low	Very low
55.	User permissions elements are available in the current system.	Very high	High	Medium	Low	Very low
56.	The current system can recover data if it is lost.	Very high	High	Medium	Low	Very low
57.	The current system maintains patient privacy and data safety.	Very high	High	Medium	Low	Very low

58.	Is there a "Continuous Education Unit" per Hospital/ medical centre?	Yes	No
59.	Do the healthcare professionals have an individualized system to assess their training gaps and to evaluate the goals of continuous education annually?	Yes	No
60.	Is there an annual training Plan related to achieving the goals of the current Healthcare Service strategies or policies for the healthcare professionals?	Yes	No

Section B: Information on the University's Teaching System in the Field of Health Management.

1- General Information about the Institution.

Name of university	
Name of department (responsible for filling out this form)	
Number of undergraduate and postgraduate students in the university	
Number of academic staff in the University	
Number of undergraduate and postgraduate programs in the University	
Language/s of instruction used at the University	

Any ongoing or future projects that your University is working on in the field of Health Management (other than SAHA)	
Any ongoing or future collaboration with local/regional/international stakeholders that your University is working on in the field of Health/Health Management?	
Number of medical facilities associated with the University	

2- Describe the current teaching program in the field of Health Management at your university: Department name and location, Number and name of courses, number of professors involved, student enrolled, strengths, weaknesses and opportunities).

3- Describe the current credit system used for the current Health management teaching program in your University (lessons, internships, lab, etc). Also, describe the foreseen credit system for the new SAHA curriculum.

4- What are the main challenges for the establishment of SAHA Curriculum in Health Management at your university?

5- Describe the accreditation procedure followed at your University and requirements needed for the establishment of the new SAHA curriculum.

Section C: Information on Training Programs and Needs.

1- Describe the current training program/s provided by your University for the academic and administrative staff, and student in the Field of Health Management

2- Based on past experience, what do you think is the most effective approach for the training programs in your university (Field training, study visits, Workshops, seminars, lectures, on-line sessions, or any others), and why?

3- Describe the needs of educators in terms of teaching methodologies and practices in the field of Health Management

4- To what extent do you think the following proposed training domains would be effective for enhancing the capacities of the Academic and administrative staff at your University?

Training in information and communication technology	Very effective	Effective	Somewhat effective	Not effective
Training in English language	Very effective	Effective	Somewhat effective	Not effective
Training in digital teaching and learning	Very effective	Effective	Somewhat effective	Not effective
Training in using new ICT technologies to manage the collected health data	Very effective	Effective	Somewhat effective	Not effective
Training in quality and project management	Very effective	Effective	Somewhat effective	Not effective
Training in international cooperation management	Very effective	Effective	Somewhat effective	Not effective
Training in global health/training in healthcare management	Very effective	Effective	Somewhat effective	Not effective

Section D: Information on equipment needs.

1- Please list down the currently available technological equipment used for Health data collection, analysis and storage at your University, providing a short description and explanation for each (you may add rows as needed).

Item	Description/ explanation

2- Please list down the specific needs for equipment for Health data collection. Please make sure that the equipment needs are consistent with the overall organization and objectives of the project, and with the actual budget limits, insurance and shipping costs (you may add rows as needed).

Item	Description/ explanation

3- Describe the standard purchase procedure for equipment followed at your University.

Thank you for completing the questionnaire!

Appendix 2: SAHA WP1 Questionnaire- Arabic

SAHA – مشروع صحة **raiSe libyAn Higher education heAlth sector for the benefit of local society** **تطوير قطاع التعليم العالي الليبي لصالح المجتمع المحلي** Erasmus+ Call for Proposals 2019 – EAC/A03/2018 PROJECT REFERENCE NUMBER: 618491-EPP-1-2020-1-IT-EPPKA2-CBHE-JP	
رقم حزمة العمل	1
نوع حزمة العمل	الإعداد
العنوان	تحليل وتقييم احتياجات قطاع التعليم العالي الصحي في ليبيا

يهدف هذا الاستبيان إلى جمع بيانات دقيقة وموثوقة فيما يتعلق بالوضع الحالي لقطاع الإدارة الصحية في مؤسسات التعليم العالي الليبية، حيث تم تصميمها على هيئة أربعة أجزاء رئيسية تتناول المجالات والأنشطة الأكاديمية الرئيسية للمشروع؛ وهي 1) تضمين ست مقررات دراسية جديدة في مجال الإدارة الصحية بالجامعات الليبية الشريكة، 2) وإنشاء مركز لجمع البيانات الصحية في كل من الجامعات الليبية الشريكة، 3) وتنفيذ البرنامج التدريبي للمشروع، 4) وتوفير المتطلبات التكنولوجية اللازمة لمراكز البيانات الصحية لكل جامعة ليبية شريكة. سيتم تحليل نتائج هذه الاستبانة بعناية لتقييم الاحتياجات وستساهم بشكل كبير في تصميم إطار عمل الأنشطة التابعة للمشروع فيما يلي حزمة العمل هذه. لذلك، يرجى الإجابة بدقة على جميع الأسئلة.

الاستبيان من إعداد:
أ. إلهام حسن القليب.
أ. علي محمد احميدة.
د. سالم محمد شنيشح.
فريق جامعة مصراتة لمشروع صحة (E+ SAHA)

الجزء الأول: المعلومات حول المرفق الطبي.

61.	اسم المستشفى[7]					
62.	نوع المستشفى.	مستشفى قروي	مستشفى عام	مستشفى تخصصي	مركز طبي	
63.	توجد رؤية ورسالة وأهداف واضحة للمستشفى.	عالي جدا	عالي	متوسط	ضعيف	ضعيف جدا
64.	السعة السريرية المقررة.					
65.	السعة السريرية الفاعلة.					
66.	عدد الكوادر البشرية المعتمدة بالملاك الوظيفي.	عنصر طبي	عنصر طبي مساعد (يشمل التمريض)	عنصر فني	عنصر إداري وتسييري	
67.	عدد الكوادر البشرية الحالية بالملاك الوظيفي.	عنصر طبي	عنصر طبي مساعد (يشمل التمريض)	عنصر فني	عنصر إداري وتسييري	
68.	الوضع الحالي للمؤسسة الصحية.	تعمل بشكل كامل	تعمل بشكل جزئي	لا تعمل على الاطلاق		
69.	الجامعة التي لها ارتباط بالمستشفى.					
العمل بالأقسام الطبية						

[7] في حالة وجود أكثر من مستشفى لها علاقة بمؤسسة التعليم العالي، يرجى تعبئة "الجزء الأول" للاستبيان من قبل كل مستشفى

.70	الآلية المتبعة في جمع الملفات من الأقسام الطبية إلى قسم التوثيق والاحصاء الطبي بعد خروج المريض.	يومي	أسبوعي	نصف شهري	شهري	أخرى
.71	يوجد بالقسم الطبي برنامج مخصص لجمع البيانات.	نعم			لا	
.72	إذا كانت الإجابة على 11 نعم، فما هو البرنامج المستخدم؟	مصمم محليا	تجاري: (*يرجى اضافة اسم البرنامج*)		أخرى	
.73	هل يمكن للبرنامج المستخدم تبادل البيانات خارج النظام المحلي؟	نعم	جزئيا فقط	لا	لا أعلم	
.74	يقوم الأطباء العاملين بالأقسام بكتابة التشخيص (المبدئي والنهائي) بواسطة التصنيف الدولي للأمراض – النسخة العاشرة ICD-10.	100%	61-99%	40-60%	20-39%	< 20%
.75	يحرص الأطباء العاملين بالأقسام الطبية على استيفاء كافة البيانات المتعلقة بالتشخيص والإجراءات العلاجية التي يتم اجراءها للمريض بالمستشفى.	100%	61-99%	40-60%	20-39%	< 20%
.76	يحرص القسم الطبي على التدقيق والمراجعة لاستيفاء البيانات داخل الملف الطبي قبل احالته إلى قسم التوثيق والاحصاء.	100%	61-99%	40-60%	20-39%	< 20%
.77	يتم تدريب الأطباء بشكل دوري على التصنيف الدولي للأمراض النسخة العاشرة ICD-10 داخل المستشفى.	عالي جدا	عالي	متوسط	ضعيف	ضعيف جدا
.78	يتوفر بكل قسم طبي أو وحدة من القسم الطبي بالملاك الوظيفي، وظيفة فني سجلات طبية.	100%	61-99%	40-60%	20-39%	< 20%
.79	يتم شغر وظيفة فني سجلات طبية بالأقسام الطبية من قبل أشخاص ذوي مؤهلات علمية وكفاءة فنية والمهارات اللازمة للتعامل مع الملف الطبي.	نعم	جزئيا فقط		لا	

.80	تتوفر الإمكانيات والتجهيزات الفنية اللازمة لإدخال بيانات المريض بشكل الكتروني داخل الأقسام الطبية.	100%	61-99%	40-60%	20-39%	< 20%
.81	يقوم الأطباء العاملين بالأقسام الطبية بإدخال بيانات المريض بصورة الكترونية.	100%	61-99%	40-60%	20-39%	< 20%
.82	يتم ربط أجهزة الحاسوب الموجودة بالأقسام الطبية مع بعضها خلال شبكة داخلية أو عبر شبكة الانترنت.	عالي جدا	عالي	متوسط	ضعيف	ضعيف جدا
.83	مدى ملائمة المكان المخصص للأرشيف في حفظ الملفات الطبية (مساحة – تجهيزات – اضاءة – تهوية).	عالي جدا	عالي	متوسط	ضعيف	ضعيف جدا
العمل بقسم المعلومات الصحية (التوثيق والاحصاء – التوثيق والمعلومات – السجلات الطبية – الأرشيف)						
.84	هل يوجد في الهيكل التنظيمي للمؤسسة الصحية قسم أو إدارة تختص بنظم المعلومات الصحية؟	نعم			لا	
.85	ما هو مسمى هذا القسم؟					
.86	توجد مهام واختصاصات واضحة للقسم.	عالي جدا	عالي	متوسط	ضعيف	ضعيف جدا
.87	ما هي تبعية هذا القسم/ هذه الوحدة ضمن الهيكل الإداري؟	المدير العام	المدير المساعد	إدارة الشؤون الطبية	إدارة الشؤون الإدارية	أخرى
.88	يوجد دليل مكتوب للإجراءات المتبعة عن كيفية استخدام النظام الحالي.	نعم		جزئيا فقط		لا
.89	آلية نظام العمل داخل القسم.	ورقي		إلكتروني		ورقي + إلكتروني

90.	كم عدد العاملين بهذا القسم أو الوحدة؟	دوام كامل ( )		دوام جزئي ( )	
91.	مدى تناسب المؤهلات والتخصصات للعاملين داخل الوحدة / القسم مع المهام المكلفين بها.	عالي جدا	عالي	متوسط	ضعيف	ضعيف جدا
92.	مدى توفر درجة دقة وشمولية المعلومات التي يوفرها نظام جمع البيانات.	عالي جدا	عالي	متوسط	ضعيف	ضعيف جدا
93.	مدى سرعة استجابة النظام في توفير المعلومات.	عالي جدا	عالي	متوسط	ضعيف	ضعيف جدا
94.	درجة الاعتماد على النظام الالكتروني في حفظ المعلومات.	عالي جدا	عالي	متوسط	ضعيف	ضعيف جدا
95.	مدى توفر الأجهزة الالكترونية (الحواسيب) اللازمة لعمل النظام.	عالي جدا	عالي	متوسط	ضعيف	ضعيف جدا
96.	مدى توفر شبكة اتصال تربط بين وحدة الإحصاء او السجلات الطبية، مع الأقسام الطبية العلاجية داخل المستشفى.	عالي جدا	عالي	متوسط	ضعيف	ضعيف جدا
97.	مدى سماحية الهيكل التنظيمي للمؤسسة الصحية بتبادل المعلومات مع الأقسام الأخرى بأريحية وسهولة.	عالي جدا	عالي	متوسط	ضعيف	ضعيف جدا
98.	اعتماد التصنيف الدولي للأمراض ICD-10 في توثيق السجلات الطبية للمرضى.	100%	61-99%	40-60%	20-39%	< 20%
99.	تتوفر السرعة المناسبة عند ادخال وتعديل البيانات في النظام الحالي.	عالي جدا	عالي	متوسط	ضعيف	ضعيف جدا
100	تتوفر السرعة المناسبة عند اعداد التقارير والمعلومات في النظام الحالي.	عالي جدا	عالي	متوسط	ضعيف	ضعيف جدا

101	يمكن الاعتماد على البيانات الناتجة من النظام الحالي.	عالي جدا	عالي	متوسط	ضعيف	ضعيف جدا
102	يوفر النظام الحالي معلومات وافية ودقيقة.	عالي جدا	عالي	متوسط	ضعيف	ضعيف جدا
103	يلبي النظام الحالي الأهداف والمتطلبات المحددة له.	عالي جدا	عالي	متوسط	ضعيف	ضعيف جدا
104	يوفر النظام الحالي التقارير اللازمة في الوقت المناسب لكافة المستويات الإدارية المختلفة.	عالي جدا	عالي	متوسط	ضعيف	ضعيف جدا
105	البرمجيات المستخدمة تمكن مستخدمين النظام الحالي من تبادل المعلومات بسهولة ويسر.	عالي جدا	عالي	متوسط	ضعيف	ضعيف جدا
106	النظام الحالي يتيح لأكثر من مستفيد الاتصال في وقت واحد.	عالي جدا	عالي	متوسط	ضعيف	ضعيف جدا
107	يستخدم النظام الحالي شبكة اتصال محوسبة لنقل البيانات والمعلومات.	100%	61-99%	40-60%	20-39%	< 20%
108	شبكة الاتصال المستخدمة كافية لإنجاز الاعمال المطلوبة في الوقت المناسب.	عالي جدا	عالي	متوسط	ضعيف	ضعيف جدا
109	نظم إدارة وتشغيل قواعد البيانات التي يستخدمها النظام لها قدرة عالية من حيث (تخزين - استرجاع - حذف – عرض طباعة).	عالي جدا	عالي	متوسط	ضعيف	ضعيف جدا
110	النظام الحالي يواكب التغيرات التي تحدث.	عالي جدا	عالي	متوسط	ضعيف	ضعيف جدا
111	تتميز البيانات المستخرجة من النظام الحالي بصحتها وسلامتها ويمكن الاعتماد عليها.	عالي جدا	عالي	متوسط	ضعيف	ضعيف جدا

112	البيانات الناتجة من النظام الحالي تطابق الواقع الفعلي.	عالي جدا	عالي	متوسط	ضعيف	ضعيف جدا
113	يستطيع النظام الحالي تقديم المعلومة المرغوبة فقط واستبعاد المعلومات الثانوية.	عالي جدا	عالي	متوسط	ضعيف	ضعيف جدا
114	تتوفر العناصر السرية في الدخول الى المعلومات في النظام الحالي.	عالي جدا	عالي	متوسط	ضعيف	ضعيف جدا
115	تتوفر عناصر تحديد الصلاحيات للمستخدمين في النظام الحالي.	عالي جدا	عالي	متوسط	ضعيف	ضعيف جدا
116	النظام الحالي يمكنه استرجاع البيانات حال فقدانها.	عالي جدا	عالي	متوسط	ضعيف	ضعيف جدا
117	يحافظ النظام الحالي على خصوصية المرضى وسلامة بياناتهم.	عالي جدا	عالي	متوسط	ضعيف	ضعيف جدا
118	هل يوجد "وحدة تعليم مستمر" لكل مستشفى/ مركز طبي؟	نعم			لا	
119	هل لدى المتخصصين في الرعاية الصحية نظام مخصص لتحديد احتياجات التدريب وتقييم أهداف "التعليم المستمر" سنويًا؟	نعم			لا	
120	هل هناك خطة تدريب سنوية تتعلق بتحقيق أهداف استراتيجيات أو سياسات خدمات الرعاية الصحية الحالية لأخصائيي الرعاية الصحية؟	نعم			لا	

الجزء الثاني: المعلومات حول نظام التدريس بالجامعة في مجال الإدارة الصحية.

6- معلومات عامة عن المؤسسة.

اسم الجامعة.	
اسم القسم (المسؤول عن تعبئة هذا النموذج).	
عدد طلاب البكالوريوس والدراسات العليا في الجامعة.	
عدد أعضاء هيئة التدريس في الجامعة.	
عدد برامج البكالوريوس والدراسات العليا في الجامعة.	
اللغة / اللغات المستخدمة للتدريس في الجامعة.	
أي مشاريع جارية أو مستقبلية تعمل عليها جامعتك في مجال الإدارة الصحية (غير SAHA).	
أي تعاون جار أو مستقبلي في مجال الصحة/ الإدارة الصحية تعمل عليه جامعتك مع أصحاب المصلحة المحليين أو الإقليميين أو الدوليين.	
عدد المرافق الطبية المرتبطة بالجامعة.	

7- صِف البرنامج التدريسي الحالي في مجال الإدارة الصحية في جامعتك (اسم القسم ولأي كلية يتبع، عدد المقررات الدراسية واسمها، عدد أعضاء التدريس، عدد الطلاب الملتحقين، نقاط القوة والضعف، والفرص).

8- صِف نظام الوحدات الحالي المتبع في برنامج الإدارة الصحية بالجامعة (لساعات المحضرات، التدريب، المعمل، أو غيرها) كذلك، صف نظام الوحدات المخطط للمقررات الدراسية الخاصة بمشروع صحة.

9- ما هي التحديات الرئيسية لإنشاء منهج مشروع صحة (الست مقررات دراسية) في الإدارة الصحية في جامعتك؟

10- وضّح إجراءات الاعتماد المتبعة في جامعتك والمتطلبات اللازمة لاعتماد منهج مشروع صحة الجديد.

الجزء الثالث: المعلومات حول البرامج التدريبية والاحتياجات للبرامج التدريبية.

5- صِف البرامج التدريبية الحالية التي تقدمها جامعتك للكادر الأكاديمي والإداري والطلاب في مجال الإدارة الصحية.

6- بناءً على التجارب السابقة، ما هي برأيك المنهجية الأكثر فاعلية لبرامج التدريب في جامعتك (تدريب ميداني، زيارات دراسية، ورش عمل، ندوات، محاضرات، جلسات عبر الإنترنت، أو غيرها)، ولماذا؟

7- وضّح احتياجات المعلمين فيما يتعلق بمناهج وطرق التدريس في مجال الإدارة الصحية.

8- إلى أي مدى تعتقد أن مجالات التدريب المقترحة التالية ستكون فعالة في تعزيز قدرات الكادر الأكاديمي والإداري في جامعتك؟

التدريب في مجال تكنولوجيا المعلومات والاتصالات.	فعال جدا	فعال	إلى حد ما	غير فعال
التدريب في اللغة الإنجليزية.	فعال جدا	فعال	إلى حد ما	غير فعال
التدريب في التدريس والتعلم الرقمي.	فعال جدا	فعال	إلى حد ما	غير فعال
التدريب على استخدام تقنيات تكنولوجيا المعلومات والاتصالات الحديثة لإدارة البيانات الصحية المجمعة.	فعال جدا	فعال	إلى حد ما	غير فعال
التدريب في الجودة وإدارة المشاريع.	فعال جدا	فعال	إلى حد ما	غير فعال
التدريب على إدارة التعاون الدولي.	فعال جدا	فعال	إلى حد ما	غير فعال
التدريب في مجال الصحة العالمية/ التدريب في إدارة الرعاية الصحية.	فعال جدا	فعال	إلى حد ما	غير فعال

الجزء الثالث: المعلومات حول احتياجات المعدات والأجهزة التكنولوجية.

4- يرجى إدراج المعدات التكنولوجية المتاحة حاليًا والمستخدمة لجمع البيانات الصحية وتحليلها وتخزينها في جامعتك، مع تقديم وصف وشرح مختصر لكل منها (يمكن إضافة صفوف حسب الحاجة).

الصنف	الوصف

5- يرجى ذكر الاحتياجات الخاصة بمعدات جمع البيانات الصحية. يرجى التأكد من أن احتياجات المعدات متوافقة مع إطار عمل وأهداف المشروع، ومع حدود ميزانية المخصصة للمعدات، وتكاليف التأمين والشحن (يمكن إضافة صفوف حسب الحاجة).

الصنف	الوصف

6- وضّح إجراءات الشراء للمعدات المتبعة في جامعتك.

شكرا جزيلا لحسن تعاونكم!