AAHCI

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SPECIAL ISSUE

INNOVATING ACADEMIC HEALTH SYSTEMS IN TIMES OF CRISIS AND CHANGE

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SPECIAL ISSUE

INNOVATING ACADEMIC HEALTH SYSTEMS IN TIMES OF CRISIS AND CHANGE

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Introduction

On Sept. 7-8, 2023, the annual meeting of the AAHCI European Regional Office took place at the University of Zurich. The Medical Faculty of the University of Zurich is the home institution of the European Regional Office and hosted this high-ranking, international meeting of European and worldwide academic health center leaders, under the overarching theme, "Innovating Academic Health Systems in Times of Crisis and Change."

The AAHCI European Regional Office, led by Dean Prof. Frank Rühli, Prof. Luciano Saso, and Dr. Nicole Bender, chose this theme because of the multiple challenges that academic health centers in Europe and worldwide are having to face today. Accordingly, sessions included topics such as "Emerging Issues and Challenges — How Is Your Academic Health Center Responding?" "Innovating Health Education and Health Care Delivery — Strategies and Best Practices," "Crisis Strategies and Best Practices for Academic Health Centers," and "Adapting and Adopting Innovative Models: Unique Health Systems in Europe." These interactive sessions were complemented by timely keynote talks on "Implementing Innovations in the Current Health Care Landscape: Achievements and Challenges" (speaker, Prof. Beatrice Beck Schimmer), reporting on experiences from the University of Zurich, "Collaborating to Grow a Resilient Academic Health Center During Social Change: Univer-Cities — an Asian Perspective and Singapore Strategic Model" (speaker, Prof. Anthony S.C. Teo) , and "Communication, Trust, and Bridging the Gap Between Medicine and the Science Disciplines: Implications for Education,

Research, and Patient Care" (speaker, Prof. Martin Paul), which reflected on challenges at Ruhr University Bochum in Germany.

In this special issue of *AAHCI Leadership Perspectives*, several participants resume their contributions. The overarching message of all contributions is the emphasis on the uttermost importance of local and international collaboration to successfully face different kinds of challenges. Open communication, interdisciplinarity, the reinforcement of resilience, as well as the integration of modern technology are at the center of suggested solutions. The most relevant challenges named were the transition to a modern medical education, the lack of health care workers, crises (e.g., natural disasters and wars), and modern developments (e.g., novel technologies and data sciences). The consensus of both the conference and the present contributions is that only with strong partnerships within and between academic health centers is it possible to find answers to ongoing challenges and to be prepared for the future.

Prof. Beatrice Beck Schimmer, the Vice President of Medicine Zurich, and colleagues reported on the experience of the University of Zurich, stressing the relevance of a strong collaboration within different medical and research institutions, as well as international cooperation, to offer the best quality health care and medical education. To strengthen this collaboration, the University of Zurich created several overarching research and data science entities. Collaborations are also at the center of medical education and career development efforts.

Dr. Rachna Chowla, Joint Director of Clinical Strategy at King's Health Partners in London, illustrated the British strategy by using the example of primary health care of hypertension in Southeast London. The goal of this strategy is to improve population health and patient benefit by a rapid translation of scientific research into patient care. This strategy has led to improved case finding and detection, as well as improved case management and treatment and a better data connection among health care centers. This example shows the relevance of a strategic, multilayered, whole-system approach in health care.

An emphasis on medical education was delivered by Prof. Rimantas Benetis, Rector of the Lithuanian University of Health Sciences (LSMU) Hospital, and colleagues. They stressed the importance of not only collaborations, but also a science-based and research-oriented approach to medical education to be prepared for medical challenges of the future. LSMU relies not only on rapid technological developments and digitalization technologies to improve their health forces training, but also on a special care of students' mental health and resilience.

An international view on medical education was given by Prof. Senthil Kumar Rajasekaran of the Khalifa University of Science and Technology (UAE), who reported his experiences at the Wayne State University School of Medicine in Detroit, Michigan, U.S. Similarly, as in Europe, there is a lack of health workers and physicians in the US. Prof. Rajasekaran and his team identified several barriers within the medical curriculum, such as the lack of clarity on objectives for teaching sessions, appreciation for students' prior knowledge, and an organized approach to better engage the clinical faculty in medical education. One of the most relevant steps to face these barriers was the creation of web-based platforms to better organize the faculty's involvement and perform regular surveys among students.

Another international experience on how to improve medical education was presented by Prof. Anthony S.C. Teo of the Singapore University of Social Sciences. Singapore developed a "higher education incubator" model that aims at a rapid technological development and production of key strategic advantages in national governance, global engagement, and partnership. This

strategy is not only applied to the health sector, but also when facing global crises, such as climate change and rising sea levels.

Among the most impressive contributions to the Zurich conference and this special issue are the witness testimonies of representatives from academic health centers that have suffered major disasters, such as major earthquakes or war. Prof. Olga Garaschuk of the Eberhard Karls University of Tübingen (Germany) and president of the German-Ukrainian Academic Society reported on the efforts of Ukrainian society and its health care system to face the consequences of the Russian war against Ukraine. With the help of international efforts, such as the collaboration with the University of Tübingen, Ukraine has simultaneously rebuilt and renovated the education of its health forces to face the massive challenges imposed by the war, and to be better prepared for future events. A similar report was given during the conference by Dr. Alexander Pokanevych, president of Kiev Medical University.

Equally impressive was the report of Prof. Rümeyza Kazancıoğlu, Rector of the Bezmialem Vakif University (Istanbul, Turkey), who witnessed the major earthquake in February 2023. The national health centers were faced with 107,204 people who were heavily injured during the three-minute-long event. Over 50,000 people died across 11 cities; among them, 1,361 were students and university staff. The government, Bezmialem Vakif University, and other medical health care centers of the country had to very quickly adapt to the situation in order to provide help to the people and maintain medical and health forces education. Low-threshold and hybrid educational offers were implemented to ensure the highly needed training of medical personnel.

Situations of acute crises and the many challenges that global health systems are facing in general show how a strong collaboration among disciplines and different level partners are needed for all to be prepared for the future. The AAHCI European Regional Office will continue to organize regular webinars and in-person meetings among its members and international colleagues as platforms for direct and low-threshold exchanges. Regular publications on these meetings and experiences will contribute to the global efforts, to help increase resilience and preparedness for future challenges in the health sector.

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Implementing Innovations in the Current Health Care Landscape: Achievements and Challenges

The challenges for the medicine of tomorrow are manifold and complex. They range from demographic ageing and increase of prevalence of chronic diseases to pandemics and new diseases. New technologies, such as artificial intelligence and big data management programs, are becoming increasingly important and will have impacts on the training of the next generation of clinicians and clinician scientists, who have become a rare species. Translation of research into clinic and fast transfer of new therapies to patients are challenges based on the increasing burden of admission requirements. Last, but not least, the health care system is complex and under economic pressure.

As a center of medical excellence, Zurich is at the forefront to tackle current and future medical challenges with a great deal of innovative spirit and talent. To take advantage of this excellent position, the six institutions of University Medicine Zurich (UMZH) —University of Zurich, ETH Zurich, University Hospital Zurich, Balgrist University Hospital (Balgrist), University Children's Hospital Zurich, and the Psychiatric University Hospital Zurich — are striving for closer, coordinated cooperation. They expanded the current joint endeavors to optimize their synergies to explore new strategic and thematic priorities, and to optimally manage the tripartite research, teaching, and care. The situation in Zurich is complex, as each of these six institutions is a legal entity with its own strategic priorities. This raises challenges but also opportunities, as the synergistic potential is huge. There are only a few comparable cities worldwide, such as Boston with Harvard Medical School and Massachusetts Institute of Technology, or Munich with Ludwig-Maximilians-Universität and the Technical University of Munich.

The UMZH institutions successfully agreed on an umbrella strategy and defined precision medicine as the first strategic and thematic priority. Our vision is to make Zurich a hub for precision medicine with a focus on oncology. Cancer research has a major impact on quality of life, as cancer is the most common cause of premature death with more than one in five people developing cancer before the age of 70. We build on existing research centers that are committed to precision medicine and oncology: The LOOP Zurich, the Tumor Profiler Center, and the Comprehensive Cancer Center Zurich.

The LOOP Zurich, a translational research center, was founded by the UMZH institutions to combine the strength of ETH Zurich and the University of Zurich in basic biomedical research and bioinformatics, with the clinical research performed at the four university hospitals in Zurich. The main goals of The LOOP Zurich are to develop and provide advanced analytics, bioinformatics, and data processing tools capable of handling large data collections. Together, these

advancements will contribute to the understanding of disease origin and course, and will facilitate the development of innovative, disease-modifying therapies that efficiently and comprehensively address the needs of individual patients. The LOOP Zurich supports research activities within large consortia in an interdisciplinary approach.

The Tumor Profiler Center is a partnership between University of Zurich, ETH Zurich, University Hospital Zurich, and the University Hospital Basel. Its goal is to enable oncologists and tumor boards to make better informed, actionable treatment decisions by "profiling" tumor tissue, leading to improved personalized care of cancer patients. The LOOP Zurich and the Tumor Profiler Center both contain and provide cutting-edge technology platforms for medical research projects. Data retrieved by these platforms support the clinicians' decision-making on the tumor boards.

As part of a strategic alliance with University of Zurich, University Hospital Zurich, Balgrist, and University Children's Hospital Zurich, the Comprehensive Cancer Center Zurich provides excellence in cancer medicine and implements innovative research programs toward precision oncology; it is primarily content-, need-, and delivery-driven. Its strengths are a common mission and goal, a continuous bridge with overarching competence from bench to bedside, and the potential for very high visibility.

Besides supporting these three research centers, the UMZH institutions approach their unified mission by primarily creating central infrastructures for open-access, harmonizing data, according to the FAIR principles (i.e., findable, accessible, interoperable, and reusable). The LOOP Zurich BioMedical Informatics Platform aims to create a compatible data processing environment in Zurich; i.e., data-driven medicine. The platform will be embedded into national structures and fill existing gaps. The UMZH Biobank will complement the platform; both tools are key for Zurich and will form a single-entry portal to search for data and samples. More information about UMZH and its projects can be found at umzh.uzh.ch/.

UMZH has also taken important steps to integrate gender medicine, as it is essential to the enhancement of precision medicine. In recognizing historical gender disparities, the vice president of medicine has taken the lead in creating a dedicated chair for gender medicine position. Additionally, she has played a pivotal role in initiating a National Research Programme of the Swiss National Science Foundation called, "Gender Medicine and Health." This program focuses on building a comprehensive knowledge foundation for understanding sex and gender dynamics in medical research, health care, and education in Switzerland. Integrating gender medicine into health care practices can lead to more tailored and effective medical interventions, ultimately improving health outcomes for individuals of all genders.

Finally, the University of Zurich is working closely with key partners to tackle issues related to workforce shortages. Responding to the shortage of physicians, the Swiss Federal Council and Parliament have endorsed a special program to increase the number of human medicine degrees. This initiative has led to the growth of Swiss universities dedicated to training medical professionals. To further address the physician shortage, an innovative "Joint Medical Master" program was introduced in the fall of 2020. This collaborative effort involves the Faculty of Medicine at the University of Zurich, the University of St. Gallen, and the University of Lucerne. Additionally, ETH Zurich contributes with a distinctive "Bachelor of Science in Medicine" program, and in 2020, the University of Lugano launched its own master's program. Together, these measures have substantially increased student numbers in Switzerland through collaborative efforts.

To ensure the quality of education across all the mentioned institutions, recognizing the necessity of providing students with a contemporary and high-quality education, the establishment of innovative educational programs requires the coordination of specific activities and potential focus areas. To meet this demand, the Faculty of Medicine at University of Zurich has taken the lead in initiating the Medical Education Network, which encompasses seven institutions across Switzerland, including the aforementioned ones, and dedicates its effort toward the training of medical professionals. Its goal is to facilitate the exchange of information regarding the curricula of bachelor's and master's programs among all partners, ensure compatibility between bachelor's and master's programs in medicine at different universities, and provide information to partner hospitals and other institutions involved in medical student training. Additionally, the network focuses on innovations in medical education, encompassing structural, content-related, and didactic aspects. The collaborative structure ensures effective coordination, communication, and information flow within the network, fostering a comprehensive and unified approach to medical education in Switzerland.

Supporting clinician scientists to allocate dedicated time for research is a paramount initiative across University of Zurich's four university hospitals, Center for Dental Medicine, and Vetsuisse Faculty. This commitment underscores the recognition of the vital roles that clinician scientists play in advancing medical knowledge and enhancing patient care. University of Zurich's career development program, Filling the Gap, is a dedicated initiative designed to nurture and empower talented and motivated clinician-scientists in their early careers, with the goal of increasing the number of women in the field. As part of our ongoing efforts, UMZH is in the process of also establishing a program for advanced clinician-scientists to provide funding for protected research time to doctors pursuing careers in both clinical practice and research. By doing so, we aim to create an environment that encourages and supports the dual commitment to patient care and the advancement of medical science.

One of the distinguishing features of the career development program is the provision of experienced scientists who serve as advisors and mentors. These seasoned professionals play crucial roles in guiding prospective, established young scientists through the complexities of their professional and personal development. Their insights, expertise, and mentorship contribute significantly to the success and growth of the participants, ensuring a holistic approach to career advancement. In essence, the career development program is not just a support mechanism for research endeavors but a comprehensive initiative that nurtures the academic journeys of clinician-scientists. By providing a conducive environment, protected research time, and expert guidance, this program seeks to catalyze impactful contributions to the realms of medicine and dentistry, while shaping future leaders in these fields.

To address the need for a robust academic pipeline, there is a concerted effort to increase the number of assistant professorships with tenure tracks. This strategic approach not only provides opportunities for aspiring academics but also ensures the continuity of excellence in teaching, research, and clinical practice. Furthermore, the junior faculty development program of the Faculty of Medicine offers continuing education courses in leadership. This involves comprehensive support in leadership skills, financial literacy, and other aspects essential for the growth and success of junior academics. Nurturing the talents of early-career faculty members contributes to the overall strength and sustainability of the academic and clinical landscapes.

In parallel, initiatives aimed at promoting careers and entrepreneurship are being developed. These

endeavors seek to create a conducive environment in which individuals can thrive in both their professional development and entrepreneurial pursuits. An illustration of this emphasis is found in initiatives like the Therapy Development Accelerator, a program that serves as a catalyst for entrepreneurial ventures within the medical and research communities, encouraging innovative solutions and breakthroughs.

In essence, these multifaceted initiatives underscore a commitment to fostering a dynamic and supportive environment that enables clinician-scientists and emerging academic leaders to thrive, innovate, and contribute significantly to the advancement of medical knowledge and health care delivery.

We strive to bundle the research and clinical expertise available in Zurich with the goal of aligning strategies of the UMZH institutions and the educational network with national partners. If we succeed, it will be an enormous gain, not only for Zurich but also for Switzerland.

> “As a center of medical excellence, Zurich is at the forefront to tackle current and future medical challenges with a great deal of innovative spirit and talent.”

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The Lithuanian University of Health Sciences (LSMU) Experiences Innovating Health Education and Health Care Delivery in Times of Crisis and Change

Life in the modern world is constantly evolving in a progressive spiral, making it increasingly complex and fast-paced. Every day, we are attacked with a vast amount of both true and false information, which can be overwhelming; therefore, it is essential to set our limits on what we can handle. Nowadays, education is about providing knowledge and creating opportunities for new developments and finding solutions that can address local and global challenges.

LSMU, together with University Hospital Kaunas Clinics and Kaunas Hospital, serves as a central hub for training health care professionals, introducing innovative technologies, providing advanced training, and conducting research in Lithuania and the Baltic region. Lithuania's public expenditure on health amounts to 2.62 billion euros or 5.29% of gross domestic product. Lithuania's compulsory health insurance fund covers 99% of inpatient visits, 90% of outpatient visits to specialists, and up to 100% of primary health care visits, which is quite impressive for a small country. The costs, however, of medical equipment, treatment, and care products continue to rise yearly, making it challenging for academic health centers to supply modern, sophisticated, and sturdy equipment to ensure the highest quality of patient care, and to develop practical skills for medical students.

LSMU was founded in 1920 and has since become the largest higher education institution for biomedical sciences in Lithuania. It successfully integrates studies, research, and clinical practice. The university's unique role in the educational process is to promote a healthy society that ensures Lithuania's social and economic progress; preserves and develops its national identity, culture, and traditions; and contributes to the world.

LSMU has around 8,000 students enrolled in its first, second, and third cycles or integrated health care study programs. Every fourth student is international. Studying abroad and becoming a health care professional is a dream come true for most students; however, it also comes with its own set of challenges, such as adapting to a new environment, psychological stress, and impaired mental health; hence, the university actively provides social support, psychological resilience, adaptation, mentorship, and tutorship programs to prevent social isolation and promote cultural adaptation among foreign students. The university also evaluates the level of satisfaction of various student groups and closely monitors their academic achievements, which can serve as early indicators of stress or psychological instability.

LSMU has been providing international health care education for over 30 years. The university aims to promote openness to diverse cultures and traditions, and maintain and enhance international relations and cooperation with foreign partners and alumni in studies, research, and clinical practice. Quality education and the development of critical thinking are seen as the future of medical teaching, which is increasingly science-based and research-oriented. From their early education years, our medical students are involved in various research projects, from molecular mechanisms to clinical practice and population-based studies.

The medical faculty is challenged to educate and train future medical professionals to be critical, scientific, and systematic thinkers while also being empathetic, cooperative, and committed to society. A qualitative study by Haddad et al. revealed that most patients prefer to be treated in person by compassionate clinicians rather than through remote consultations or telemedicine.[1]

Medical students nowadays have different expectations compared to the past. They are looking for innovative education methods that will help improve the quality of health care delivery in the future. The introduction of blended, hybrid, and interactive learning allows students to access education flexibly and effectively. Although medical students possess strong computer skills, they also require hands-on training, enabling them to gain practical experience and be more active in their studies. Students must remain academically honest and motivated to successfully combine these skills. At LSMU, a problem-based learning approach trains multiple features essential for medical professionals, including judgement, competence, critical thinking, communication, self-management, and more. LSMU staff constantly evaluates the feedback provided by students and teachers to ensure a student-oriented approach to the study process.

Many academic health centers worldwide are dealing with similar issues related to ensuring the quality of health education and maintaining resilience during times of crisis. Economic uncertainties, underfunding, governmental decision-making, and pressures over university autonomy often lead to multiple bureaucratic procedures that don't necessarily ensure better outcomes. Geopolitical problems and increasing emigration lead to a decreasing number of potential students. On the one hand, increasing national and international competition indicates the need to seek higher-quality studies; on the other hand, declining demand for medical and health care specialists from the state creates a gap in health care delivery. There is a significant shortage of medical specialists, especially nursing personnel, which has created ultra-high workloads for hospital employees. General practice nurses educated at LSMU are having multiple career opportunities in various health care institutions worldwide. Upon completion of a nursing study program, students may continue to study in an advanced nursing practice master's program, which opens new horizons working as qualified assistants in a doctor's practice.

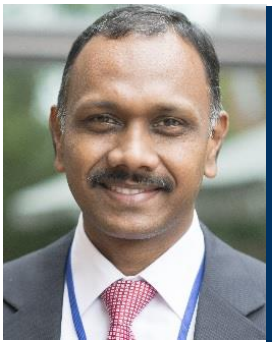
The university is developing excellence in research, innovation, and science-based technologies to strengthen human resources and develop high competencies. Rapid technological developments and digitalization technologies may provide positive in these areas, leading to progression in health care delivery and enabling fast and reliable health care, automated data analysis and workflows, and shared experience. Digitalization, however, faces multiple risks associated with cybersecurity, data transmission, and privacy considerations. LSMU is putting efforts into increasing the staff's ability to maintain resilience and function, and build skills to endure hardship. Participation in international projects and networks can help improve the university's visibility and prestige, and increase the quality levels of the academic community and scientists. Potential international cooperation

creates socially responsible, self-critical academic staff, helping to provide sustainable and internationally competitive study programs. LSMU actively contributes to national and international initiatives and participates in policy-making and implementation, science promotion, public education, and culture-fostering activities.

> "Nowadays, education is about providing knowledge and creating opportunities for new developments and finding solutions that can address local and global challenges."

Reference

1. El-Haddad C, Hegazi I, Hu W. Understanding patient expectations of health care: a qualitative study. *J Patient Exp*. 2020;7(6):1724-1731. doi:10.1177/2374373520921692.



Senthil Kumar Rajasekaran, MD, MMHPE, FCP, FAcadMed

Vice Dean of Medicine and Health Sciences

Director, Center for Medical Education Innovation

Khalifa University of Science and Technology

Innovating Health Education and Health Care Delivery

Khalifa University College of Medicine and Health Sciences (CMHS), located in the United Arab Emirates, represents a significant milestone in the region's pursuit of excellence in medical education and health care services. As a relatively new institution established in 2019, it carries both the promise of innovation and the weight of expectations to contribute meaningfully to the health care landscape, locally and globally.

One of the key aspects of CMHS is its commitment to fostering a comprehensive and interdisciplinary approach to medical education and research. The institution shares its location with Khalifa University's globally recognized college of engineering, and many of the students who matriculated to CMHS were graduates of this college. This provides a natural opportunity for students to be engaged in biomedical engineering-related education and research. This interdisciplinary approach reflects a recognition of the complex nature of modern health care challenges and the need for diverse perspectives to address them effectively.

Moreover, the university's emphasis on research is crucial for advancing medical knowledge and addressing pressing health issues. Through its research initiatives, Khalifa University College of Medicine and Health Sciences has the potential to contribute to scientific discoveries, develop innovative technologies, and improve health care practices regionally and globally.

Research in areas such as genomics and personalized medicine can have far-reaching implications for improving patient care and population health outcomes. Additionally, CMHS is the only medical school in Abu Dhabi that boasts a thriving clinical ecosystem with multinational hospitals and academic health centers.

As the UAE continues to position itself as a hub for health care and medical tourism, CMHS has a unique opportunity to play a central role in shaping the future of health care delivery in the region. By producing competent health care professionals, conducting impactful research, and promoting evidence-based health care practices, the university can contribute to raising standards of care and promoting health and well-being in the UAE and beyond.

Due to the brevity of my stay at CMHS during the 2023 AAHCI annual meeting in Zurich, my talk titled, "Innovating Health Education and Health Care Delivery," was focused on my work at the Wayne State University School of Medicine (WSUSOM) in Detroit, Michigan, U.S. At WSUSOM, I served as the senior associate dean for undergraduate medical education and led the program's team of deans, and faculty and staff members. To meet its clinical education needs, WSUSOM closely partnered with the major health systems in the Detroit area, such as Ascension St. John Medical Center, Beaumont/Oakwood Dearborn, Detroit Medical Center, Henry Ford Health, Michigan Healthcare

Professionals, Trinity Health, and Veterans Affairs hospitals.

The undergraduate medical education program consistently faced challenges in securing sufficient clinical faculty to fulfill its preclerkship, clinical education requirements. Addressing this challenge commenced with identifying all potential needs for clinical faculty. The primary priorities emerged as small, group-based clinical skills and case-based learning sessions, along with delivery of clinically oriented lectures. Other requirements for clinical faculty in delivering the undergraduate medical education curriculum encompassed course and clerkship directorship; sufficient faculty to teach and assess students in bedside, career advising, and student mentoring; research mentorship; and designing and delivering electives.

Addressing the challenge of a shortage of clinical faculty commenced with a thorough understanding of the barriers hindering faculty contributions to the program. The team focused on addressing barriers that were realistically within our capacity to tackle. The major challenges that the team identified were related to short notice, lack of clarity on objectives for the sessions, lack of appreciation for students' prior knowledge on a given topic, and lack of an organized approach to soliciting clinical faculty engagement.

After compiling a comprehensive list of needs and identifying existing barriers, the team embarked on devising solutions. One of the primary solutions involved repurposing a simple web-based appointment tool into a booking and communication system. Originally designed for client appointments, this low-cost, commercial website was adapted to organize and facilitate communication with stakeholders for educational events, requiring clinical faculty input.

The website now hosts a catalog of major educational events necessitating clinical faculty contributions, accompanied by succinct descriptions of each session. Date and time slots for each session are clearly delineated under their respective titles. The link to this sign-up system was distributed to all departments and featured prominently in departmental meetings.

Faculty members can easily access the sign-up website without needing to log in. They can browse through sessions within their expertise, select available dates and times, then provide their email and contact details to confirm their availability. Automated reminders are sent via the web-based tool to ensure faculty members stay informed. Below are screenshots of the web pages, demonstrating the three simple steps to sign up (Figures 1-3).

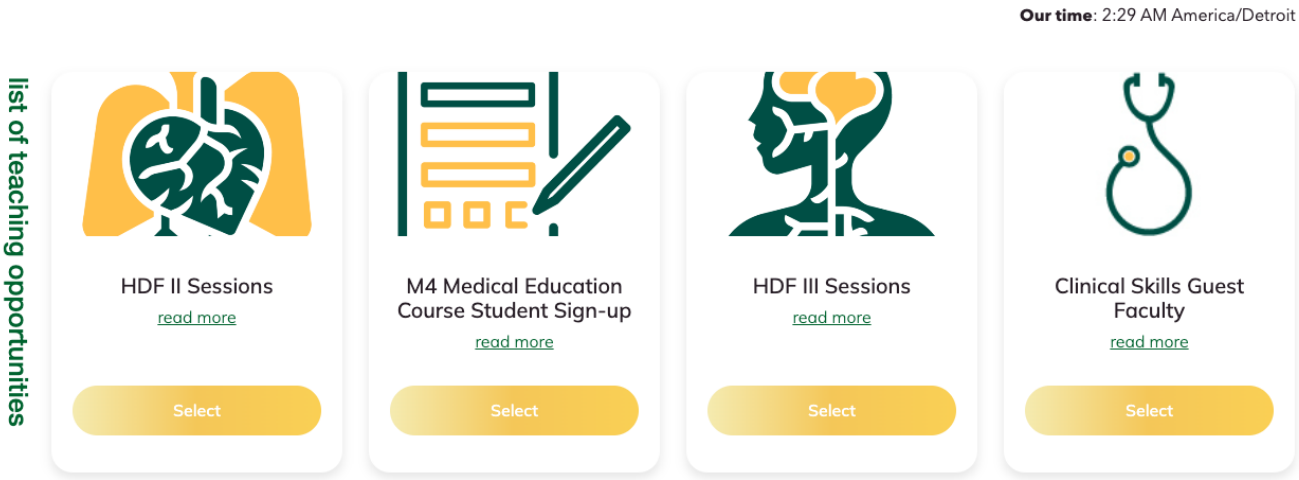


Figure 1. List of major categories of events to choose from. For example, a faculty member selects "Clinical Skills Guest Faculty."

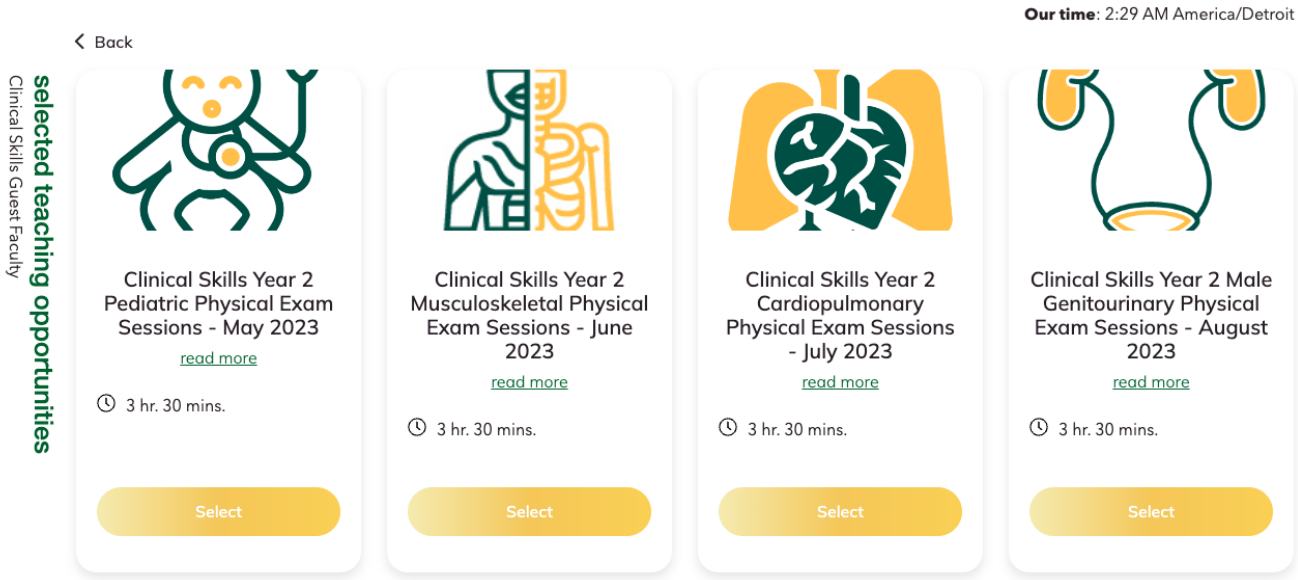


Figure 2. Continuing the example from Figure 1, the choice of sessions in the "Clinical Skills Guest Faculty" category are then displayed for the faculty member.

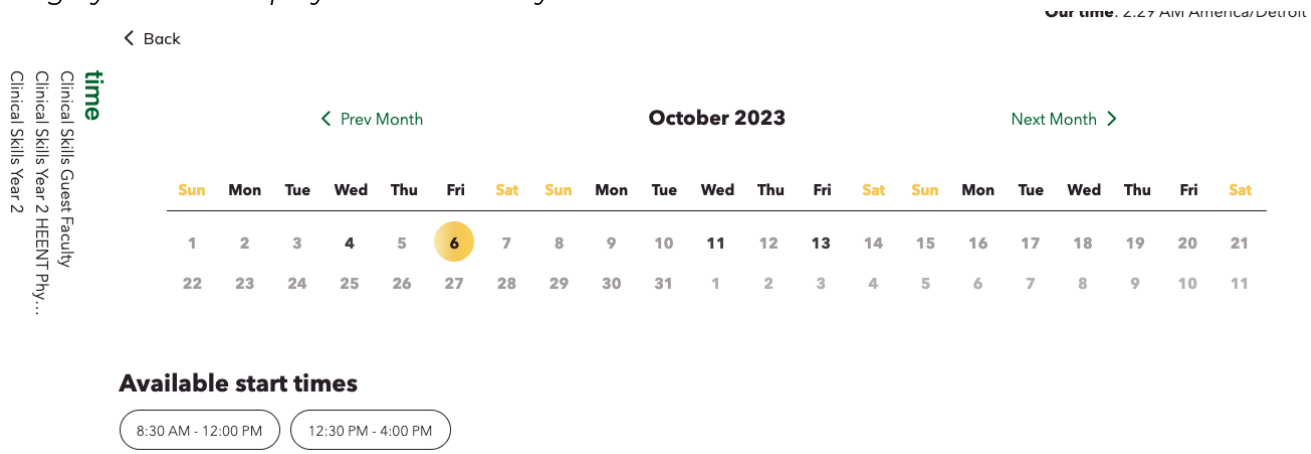


Figure 3. On this third step, the faculty member selects the date and time.

This straightforward system enabled us to tackle several key challenges voiced by the clinical faculty, including insufficient advance notice, numerous email exchanges regarding session details and availability, and a lack of event reminders.

Drawing from the literature, the discussion also explored several strategies to optimize the efficiency of interactions between clinical faculty and students in bedside settings. The aim of these strategies is to empower students to take ownership of their learning and proficiency during clerkships. One such solution involves utilizing web-based software that enables users to design surveys based on entrustable professional activities and generate comprehensive reports without necessitating prior programming expertise. This student-driven survey requires less than 30 seconds to complete and yields a longitudinal performance profile of students across assessed entrustable professional activities.

My presentation concluded by proposing additional systemic interventions aimed at enhancing educational delivery and outcomes in clinical learning environments. These interventions encompass brief and interactive faculty development sessions, the facilitation of peer-learning sessions within the institution, the refinement of clerkship didactics, and the provision of templates for various operational tasks.

Acknowledgements
I wish to acknowledge Mr. Tapinder Singh and Ms. Erika Roberts for championing this effort, and Devibala Govindarajan, MD, for continued support to sustain the practice. Mr. Singh and Dr. Govindarajan are at WSUSOM, while Ms. Roberts is currently at University of Michigan School of Dentistry.

> “This interdisciplinary approach reflects a recognition of the complex nature of modern health care challenges and the need for diverse perspectives to address them effectively.”

Rachna Chowla, MBBS, MBA

Joint Director of Clinical Strategy

King's Health Partners

The Role of an Academic Health Sciences Center in Improving Population Health: The "Vital 5" Programme and Hypertension

Academic health sciences centers in England are tasked with harnessing strategic alignment across their National Health Service partners and King's College London to improve health through the rapid translation of early scientific research into improved patient and population health.

So, what role does an academic health sciences center have in improving outcomes around hypertension, a well-established public health issue and condition viewed as "bread and butter" by many general practitioners, but which is still a critical concern in the global view?

At King's Health Partners, our initiative to improve hypertension outcomes began in 2021 when we launched the "Vital 5" initiative[1] in partnership with South East London Integrated Care System (SELICS) to address health inequities. This coincided with the findings that hypertension worsened outcomes for people with COVID-19, and that COVID-related access issues to health care negatively impacted hypertension checkups in primary care and overall control of the disease. King's Health Partners hosted a system-wide workshop on hypertension as part of its efforts to develop collective momentum around prioritizing care of hypertension and creating links within the system. This led to system-wide interest in and action on hypertension detection and control and, ultimately, goals of 77% control by March 2024 and 80% detection and 80% control by 2029.

By working with our communities, SELICS, and industry partners, we aim to achieve these goals through the application of a whole-system pathway for hypertension care, built upon translational research led by King's Health Partners.[2] The components of this initiative include:

- Increased case-finding and detection through collaboration.
    - The primary care quality improvement program, Clinical Effectiveness South East London (CESEL), applies a data-driven, peer-coaching approach to help reduce variations among hypertension care and improve processes. In 2022-23, CESEL led workshops to support hypertension quality improvement (e.g., case-finding people at risk of hypertension and improving control, especially for high-risk groups) in all 35 primary care networks in Southeast London, which covers 214 general practices. King's Health Partners is part of CESEL's steering group, and our clinicians have supported the codevelopment of hypertension clinical guides and contributed to place-based education events.
    - We have pioneered new approaches to expanding blood pressure testing in secondary care, such as the Vital 5 health check that is offered to patients while they await outpatient

appointments; the checkup covers blood pressure, weight, tobacco, alcohol consumption, and mental health. The Vital 5 health check has been taken up by more than 7,000 people in hospital and community pharmacy settings.

- Supporting blood pressure control, including active management and treatment (e.g., cocreating a self-management program).

- Data connectivity (e.g., through data dashboards that provide almost real-time blood pressure control data).

- Connecting with and supporting borough-based initiatives around the importance of blood pressure monitoring (e.g., learning from innovative approaches, such as a 100-day challenge that focuses on one locality; deep-dives of Vital 5 data to support local engagement; a hypertension risk-prediction model using a large-linked dataset). We also collaborate with industry partners who work with practice groups to test new approaches to community engagement, especially for historically marginalized groups (e.g., the Eritrean community), and talk about heart health.

This whole-system pathway to population health demonstrates an academic health sciences center in action — fully connecting research priorities to local health care needs, translating findings into clinical practice, and working with a broad range of stakeholders to ensure care is received by those most in need and at risk, in a way that builds trust and confidence in science and NHS practice among the communities served.

Outcomes and Lessons Learned

There have been several notable outcomes and lessons learned from the efforts discussed here:

1. Improvement in blood pressure control to 68.2% control in SELICS by March 2024 (had dropped to 49% during the COVID-19 pandemic in March 2021). Work by CESEL has progressed to drive up control in 2023-24 and continues in 2024-25.
2. Increased awareness and participation within the partnership of our value-adding role in population health as an AHSC.
3. Understanding the essentiality of partnership-based approaches and improved connectivity for King's Health Partners beyond traditional boundaries into community/primary care.
4. Recognizing the importance of a strategic, multilayered, whole-system approach that builds out in phases and leverages new partnerships.
5. Building system trust in parallel by working in true partnership with community organizations.
6. Appreciating the importance of using relationships, evidence, and influence to "prime" partners' priorities so that strategic aims are aligned.
7. Learning that technical solutions are never simple.

> “So, what role does an academic health sciences center have in improving outcomes around hypertension, a well-established public health issue and condition viewed as “bread and butter” by many general practitioners, but which is still a critical concern in the global view?”

Notes

1. The other areas of the Vital 5 (i.e., excess weight, alcohol consumption, mental health, and tobacco dependency) are key modifiable risk factors for hypertension, and each are more common in communities with high levels of deprivation. Health inequalities in the Vital 5 areas contribute to health inequalities in hypertension.

2. Blood pressure management in Black and South Asian communities, AIM HY trial (Wilkinson, Camb, and Chowienczyk KCL, 2022); development of self-management approaches, BPandMe (Patient empowered Blood Pressure and Cardiovascular Risk Management mHealth System; Chowienczyk, 2022).

Anthony S.C. Teo

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Founder and Series Editor, *Univer-Cities* (World Scientific Publishing)

Singapore has a unique history that contributes to our perspective of a "univer-city (UC)," a model for university leadership in which a dynamic and symbiotic relationship is built between a university and its host city, emphasizing their transformative potential and societal impact, such as utilizing research capabilities for community advancement and adaptation to societal disruptions. Such universities serially redefine their roles within their ecosystems, moving away from accusations of elitism and toward proactive engagement with pressing societal issues, like climate change.

From our experience, we can discern four factors that influence this perspective:

1. The rewriting of future history.
2. Strategic governance.
3. The combining of "intra-UC" and open-system concepts.
4. Medical origins.

Rewriting Future History

Professor Wang Gungwu, in his 2023 SR Nathan Distinguished Lecture series, noted that the 1819 "founding" of Singapore by the United Kingdom brought modernity to the region through a process of progressive and nonintrusive coexistence.

Strategic Governance

For the past 60 years, the Singapore government instituted *benign interventionist governance* (best expounded by Deputy Prime Minister and Minister for Education Dr. Goh Keng Swee's 1983 Royal Society's 3rd Memorial Harry J. Johnson Lecture). In contemporary medical and public health terms, this helped make Singapore a gold standard in fighting the 2003 SARS outbreak and ensuring a low death rate during the COVID-19 pandemic.

Combining of Intra-UC and Open-System Concepts

The National University of Singapore (NUS) drew from the professionalism of a research-driven medical tradition to create the medical hub that is now Singapore. The creation, innovation, and development of this hub aligns with the holistic evolution of the university's academics and its organizational leadership as a univer-city, based on its cohesiveness with other universities, including Singapore University of Social Sciences, Singapore Management University, Singapore University of Technology and Design, and Nanyang Technological University (NTU). Additionally, a univer-city in Singapore embraces an open system that actively attracts external universities into the univer-city of Jurong City, including Lee Kong Chian School of Medicine, a globally top-ranked medical school established by NTU in partnership with Imperial College London.

Medical Origins

Switzerland, Sweden, and Singapore share the medical origins of our univer-cities. Included within their systems are about a dozen (Karolinska), two-dozen (NUS), and four-dozen

(Zurich) schools that are considered among the global top 100 universities.

For Singapore, our medical origins began in 1818 with support from external rulers. This was made up of a relatively small cohort of administrators, families, and immigrants in a benign, noninterventionist genre of governance. In 1949, to meet the needs of the growing citizenry, Raffles College (founded 1928) merged with King Edward VII College of Medicine (founded 1905) to become the University of Malaya, along with a teaching hospital, Singapore General Hospital. This coincided with the growing attention toward health care in Malaya, Hong Kong, and Australia (although this goes back to the 1850s with the medical origins of the hospital and the University of Melbourne).

Contemporary Impact (2003-2023): From SARS to COVID-19

Dr. Tan Chorh Chuan was Singapore's chief medical officer during the SARS outbreak in 2003. He was appointed as NUS vice-chancellor and Wellcome Research Fellow, and during this tenure, he determined that there was an early need for specific capacity-building for isolation and treatment. This was accomplished through the National Centre for Infectious Diseases. After a decade of this work, he became the health care czar for the country during the height of the pandemic.

Future Perspective: From Incubator to Accelerator

The standing of NUS was further accelerated by an underlying concept of the "Singapore School of Strategic Governance (SS-SG)." Best described in the Harry J. Johnson 3rd Memorial Lecture '83 at the Royal Society by then Deputy Prime Minister and Minister for Education Dr. Goh Keng Swee, five "Multi-Merits" make up Singapore's society and contribute to its medical excellence and univer-city perspective: *multicultural, multilingual, multireligious, multinational, and multidisciplinary.* One example of how this is put into play is through an "education incubator" model documented in Harold Guida and Andrew Donnelly's chapter in volume 1 of *Univer-Cities*: *Strategic Implications for Asia. Readings from Cambridge and Berkeley to Singapore*, "Conversations in Futures of Univer-Cities in the Asia-Pacific: Singapore — Place and Education in the 21st Century."[1] In the essay, the authors speak of the evolution of Singapore's education system over time and how Singapore had strategically invested in education as a means of economic development and nation-building, emphasizing the role of educational institutions as "incubators" of talent, innovation, and socioeconomic progress.

Thus, out of the formal education model, shaped also Singapore as the "higher education incubator," transitioning from simply fostering the growth of educational initiatives to actively propelling their rapid development and success to produce key strategic advantages in national governance and global engagement and partnership, to name just a couple. Understandably, the nation now has an example of an accelerator in the growing symbiotic dynamics of the univer-city of Singapore via a complement of six autonomous universities with two marques: young NTU and the leading centennial NUS.

Self-Sustainment

The accelerator concept is developed further by former Prime Minister Lee Kuan Yew and the economics, statistics, sociology, and political thought leaders who worked to move Singapore from third world to first world status. A structured, 10-accelerator ecosystem of rich process-orientation elements includes a 20%-80% ratio of high-value manufacturing to services:

- Banking and aerospace-land-sea, supply-chain logistics.
- Copenhagen's commitment to a greener economy.
- Fully funded social security and a sovereign wealth-fund.

- Info-Com-AI.
- Medical hub.
- Social-enterprise hub.
- Quality Program for International Student Assessment and higher education.
- Systemic health care.
- A tripartite of business, government, and citizenry for industrial peace and total defense partnerships.

For example, thought leadership, governance, strategic realism of integral locality-regionality-globality, and a renewed social compact for unity and stability led to stability and self-sufficiency in water supply and sea-level issues. The process included an ambitious reinvestment of 2%-3% in research and a firm commitment to combat climate change.

Strategic realism was tested with a decision to invest SGD 50 million into a climate change reversal strategy center, led in conjunction with Singapore's commitment to defense worth SGD 100 billion against an expected 50-year rise in sea level. We have learned from missteps along the way and continue to apply and advance the univer-city perspective.[2]

> "[A 'univer-city' is] a model for university leadership in which a dynamic and symbiotic relationship is built between a university and its host city, emphasizing their transformative potential and societal impact … ."

Notes

1. Authors Harold Guida and Andrew Donnelly are architects and campus planners. They brought with them their higher education experiences in America, Australasia, and Singapore (NTU), directly engaging NTU leadership (President Su, Provost Andersson, and COO Teo) and academic leaders with input from peerless advisor Prof. Richard Bender of University of California, Berkeley's College of Environmental Design. Working together through extensive consultations with stakeholders, the outcome was the cocreated, two-decade, place-making vision of Yunnan Garden at Nanyang University, in the context of the university in Jurong City, Singapore, the Garden City and State.

2. I have a complementary address to the Univer-Cities 2023 (UC2023) conference that was cohosted with the University of Zurich in November 2023, titled "The Human Side of Univer-Cities: From UC2013@NTU to UC2023@Zurich"; and the UC2023 website: https://www.iem.uzh.ch/dam/jcr:eac9616c-6ed2-479d-a311-df8171297e42/UC2023%20Program12.pdf.

Olga Garaschuk, PhD

Chair of the Department for Neurophysiology, Eberhard Karls University of Tübingen

Vice President, German Physiological Society

President, German-Ukrainian Academic Society

Challenges and Opportunities of Ukrainian Medical Educators in Times of War

Russia's criminal war of aggression against Ukraine is hitting the Ukrainian medical education and health care system particularly hard. Over 1,300 attacks on health care facilities have been documented since Feb. 24, 2022.[1] In addition, the war has exacerbated old weaknesses and revealed new ones in the health care and medical training systems. In Ukraine, the intensive health care system traditionally consists of spatially separated specialized units (e.g., institutes of cardiology, oncology, and ophthalmology). Maximum care providers that ensure high-quality, cross-disciplinary medical training and care around the clock, such as university hospitals, are rare but urgently needed, especially for treating patients with multifaceted war injuries.

Moreover, health care professionals meet new war-related challenges and must acquire or advance their skills in such areas as emergency medical care, reanimation and transportation of heavily injured patients, control of communicable and noncommunicable diseases, in-clinic rehabilitation, mental health, and medical care of patients with post-traumatic stress disorder. This burden is further aggravated by the reduced availability of personnel due to needs at the front and internal displacement; therefore, the high-quality, high-throughput training of medical professionals is urgently needed.

Ukraine relies on both the transformation of the domestic institutions and on global cooperation to tackle the current burden on the health care system. With the help of international partners, Ukrainian medical universities are already developing new courses in reanimation, surgery (especially maxillofacial and plastic/reconstructive surgery), prosthetics, orthopedics, otorhinolaryngology, ophthalmology, and palliative care for students and health care professionals[2]; establishing partnerships with medical engineering companies worldwide, which specialize in orthoses and prostheses; and expanding virtual mobility of postgraduate students and teaching staff. The collaboration in these areas of acute need offers international partners an opportunity to update their own treatments and public health protocols, and refresh their protocols for combat-related injuries.

Further support from the worldwide community of medical educators is particularly needed for: (1) the development or adaptation of teaching curricula to best-practice standards, (2) providing consumables and mannequins for simulation centers, and (3) the development of clinical cases for student training and simulation laboratories for practicing medical skills (e.g., cardiopulmonary resuscitation and emergency medical care). Other important aspects are capacity-building through international health partnerships in telemedicine and preventive health care, inclusiveness and working in a barrier-free environment, health workforce development, and mental health care for medical professionals.

One of the first university hospitals in Ukraine is now being established at Danylo Halytsky Lviv

National Medical University. It aims to provide cutting-edge practical training for students, interns, nurses, and other health care specialists; develop and test medical innovations; and provide a platform for introducing modern diagnostic and treatment technologies. According to Ukraine's health minister, Dr. Viktor Liashko, the establishment of strong and internationally connected university hospitals "is a key step towards current and postwar reconstruction, improving the quality of medical education and medical care in Ukraine."[3] This and other health care projects are supported by the worldwide medical community. Germany, for example, has very recently signed a declaration on the expansion of cooperation with Ukraine in the health care sector,[4] aimed at supporting Ukraine's further integration into the European Union via the exchange of expertise, short-term postgraduate education and training, and the support of continuing medical education and improvement of professional skills of both countries' researchers, health professionals, and administrators. As a first practical outcome of this cooperation, the construction of a prosthetics workshop, to be funded by the German Federal Ministry for Economic Cooperation and Development, was initiated in Lviv on Jan. 30, 2024.[5] The workshop will become part of the UNBROKEN National Rehabilitation Center. An important component of the project is the training of prosthetics and orthotics specialists, according to International Society for Prosthetics and Orthotics standards, which began in February 2024.

"Maximum care providers that ensure high-quality, cross-disciplinary medical training and care around the clock, such as university hospitals, are rare but urgently needed, especially for treating patients with multifaceted war injuries."

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Rümeyza Kazancıoğlu, MD

Rector

Bezmialem Vakif University

Istanbul, Turkey

The Effects of the February 2023 Earthquake on Turkish Higher Education and Bezmialem Vakif University

The devastating earthquake that struck Kahramanmaraş, Turkey on Feb. 6, 2023, resulted in significant loss of life and extensive damage to infrastructure, including university buildings. A state of emergency was declared in 11 affected provinces, with the World Health Organization declaring a Level 3 emergency. The Council of Higher Education of Turkiye suspended education in universities across the affected provinces and postponed the spring semester. Despite the challenges, the Turkish academic community has shown resilience and solidarity in the face of adversity. Education resumed on Feb. 20, 2023, with regulatory measures implemented to address the aftermath of the earthquake that claimed the lives of 1,361 students and staff, highlighting the tragic impact on the higher education community.

Earthquake disasters can occur anywhere at any time, so the resilience of universities is very important. Bezmialem Vakif University (BVU) swiftly responded to the earthquake in Kahramanmaraş and other provinces, ensuring the safety of the people in the affected region. BVU and many other universities aligned their educational activities with the decisions of the Council of Higher Education to ensure continuity. Subsequently, BVU implemented a hybrid education model, combining face-to-face and remote learning, to accommodate students' needs and ensure educational continuity in the aftermath of the earthquake.

The Effects on Turkish Higher Education

As of April 22, 2023, official reports indicated that 50,783 people had lost their lives, and 107,204 people were injured due to the earthquake. The loss of numerous students, academics, and staff continues to be a heartbreaking reality. Additionally, the structural damage inflicted on university buildings in the affected regions have further compounded the challenges we face (Table 1, Figure 1).

In recognition of these unprecedented circumstances, the Council of Higher Education made the difficult decision on February 6 to suspend education in universities across the affected provinces, with the anticipation of reassessing the situation in the coming days. A subsequent statement on February 9 communicated the temporary postponement of the spring education and training period for all universities. This period necessitated collective resilience, support, and solidarity within the Turkish academic community. The commitment to the recovery and rebuilding efforts was unwavering, and standing united was of utmost importance in facing the challenges ahead.

Universities were allowed to resume the spring semester on February 20, contingent upon approval from the respective university boards. A series of regulatory measures were subsequently implemented to address the

aftermath of the earthquake. Approximately 371,939 higher education students out of 4,187,000 were enrolled in universities in the 11 provinces affected by the earthquake. It was stated that a total of 1,361 staff and students, including 115 international students, lost their lives in the earthquake (Table 1).

When BVU contacted its students and alumni in the earthquake region, it learned that two BVU students, one from the Faculty of Dentistry and one from the Vocational School of Health Services, had been successfully rescued after being trapped under the rubble.

Table 1. Number of Students and Staff Affected by the Earthquake

NUMBER OF STUDENTS STUDYING IN TURKEY					
Institution Type	**Associate Degree**	**Undergraduate**	**Postgraduate**	**Doctorate**	**Total**
Public	2,449,660	3,285,919	366,273	102,226	6,204,078
Private	186,763	468,176	68,212	12,282	735,433
Total	2,647,054	3,754,095	434,485	114,508	6,950,142
NUMBER OF STUDENTS STUDYING IN THE EARTHQUAKE AREA					
Institution Type	**Associate Degree**	**Undergraduate**	**Postgraduate**	**Doctorate**	**Total**
Public	108,933	209,594	36,508	7,408	362,443
Private	1,322	6,788	1,086	300	9,496
Total	110,255	216,382	37,594	7,708	371,939

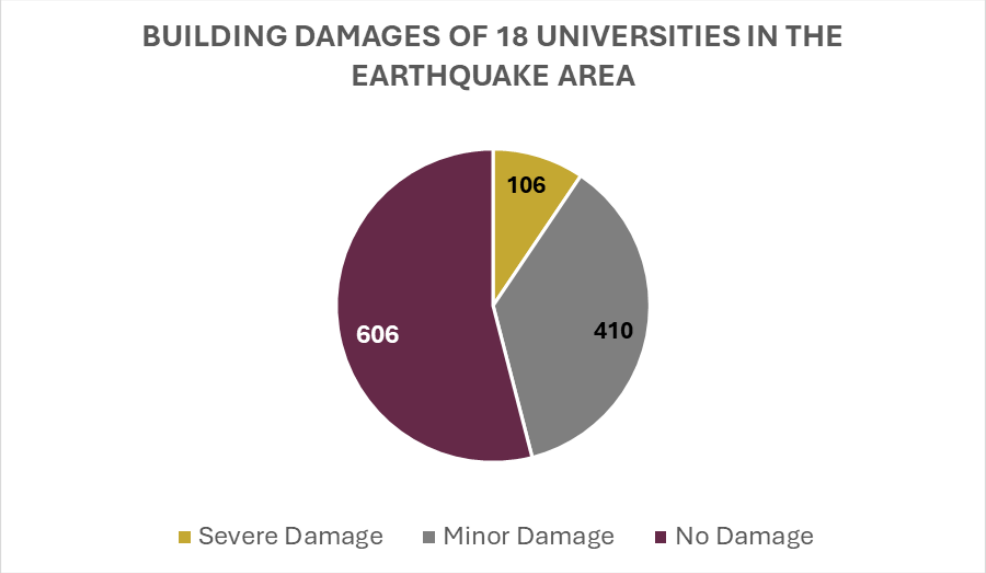

Figure 1. Structural damage inflicted on university buildings in the affected regions.

Supporting the Students

In response to the earthquake, BVU aligned with the decisions of the Council of Higher Education to ensure the continuity of educational activities. As per the February 17 Senate decision: Students in programs such as medicine, dentistry, nursing, etc., following the "Framework Regulation on Applied Education in Higher Education," continued their face-to-face education.

Students from the affected region had the option to freeze their registration within three weeks from the start of the spring term of the 2022-23 academic year, without affecting the maximum period allowed. Thereafter, BVU provided a hybrid education model, combining online and face-to-face options for students who preferred in-person classes, without mandatory attendance. Furthermore, registration procedures were facilitated for six students, five in the Faculty of Medicine and one in the Faculty of Dentistry, who were affected by the earthquake and wished to enroll as special students at BVU.

Our Health Care Activities

BVU faculty and staff served at the disaster area along with its 128 physicians, nurses, and other staff as rescuers. The university served as a tertiary hospital for earthquake victims who were referred to Istanbul for further evaluation and treatment. Only two pediatric patients were hospitalized due to rhabdomyolysis related to acute kidney injury without dialysis requirement.

Despite the challenges posed by the recent earthquake, our university remains resilient and committed to providing quality education as well as health care in Istanbul and disaster cities. We honor the memory of those we have lost and strive to rebuild not just structures but also our academic community. Together, we look forward to a brighter future where education continues to be a beacon of hope and resilience.

At our university, throughout the country, and especially at the disaster cities various precautions and measures have been taken to start on-site training in the new term thanks to the contributions of local and national authorities, academicians, and volunteers. Different disasters can be encountered around the world at any time; hence, all of us, especially those in disaster-prone areas, have to carry out prepatory work for resilience.

“Despite the challenges posed by the recent earthquake, our university remains resilient and committed to providing quality education as well as health care in Istanbul and disaster cities.”

FINAL AGENDA

2023 European Regional Meeting

The University of Zurich, Faculty of Medicine (UZH) is organizing the **2023 AAHCI European Regional Meeting** to be held September 7 – 8 in Zurich, Switzerland for academic health center leaders in the region and worldwide.

Under the theme *Innovating Academic Health Systems in Times of Crisis and Change*, leadership from AAHCI member institutions and prospective AAHCI members will gather to share best practices and explore how to best position their institution to prepare for future challenges. Leaders from the region and across the globe will explore opportunities to enhance capabilities in research, innovation, clinical care, and health professions education.

AAHCI Regional Meetings provide an excellent opportunity for peer networking and exploration of opportunities for collaboration among academic health centers.

Session topics include:

- Innovating Health Education and Healthcare Delivery: Strategies and Best Practices
- Ethical Issues: Best Practices for Effective Strategies and Responses
- Communication: Building Trust and Crisis Response Strategies
- Resilience and Social Change: The Promise and Power of Academic Health Centers

Location and more:

Meeting Venue location:
Lecture Room 01, floor G, Institute of Education, Kantonsschulstrasse 3, 8001 Zurich

Logistics:
For *registration*, *hotel information,* and the local *health and safety protocol*, please visit the meeting page.

2023 European Regional Meeting

September 7 – 8
Zurich, Switzerland

AAHCI
EUROPEAN
REGIONAL OFFICE

Thursday, September 7 *(All times listed are in Central European Time)*	
11:30 AM	Welcome Apéro *(Reception - All attendees),* Restaurant Kantorei, Neumarkt 2, 8001 Zurich
12:00 PM	Lunch *(All attendees),* Restaurant Kantorei, Neumarkt 2, 8001 Zurich
1:30 PM	***Location:*** Lecture Room 01, floor G, Institute of Education, Kantonsschulstrasse 3, 8001 Zurich Opening Remarks • Steven L. Kanter, MD, Executive Director, Alliance of Academic Health Centers International, AAHCI, Association of American Medical Colleges, AAMC (USA) • Frank Rühli, MD, PhD, Dean, Faculty of Medicine, University of Zurich, AAHCI European Regional Office Ambassador (Switzerland) • Luciano Saso, PhD, Professor, Faculty of Pharmacy and Medicine, Sapienza University of Rome, Academic Guest, University of Zurich, AAHCI European Regional Office Co-Ambassador (Italy)
1:45 PM	Keynote Presentation *Implementing Innovations in the Current Health Care Landscape: Achievements and Challenges* Beatrice Beck Schimmer, MD, Vice President Medicine, University of Zurich (Switzerland)
2:15 PM	Roundtable *Emerging Issues and Challenges – How is your academic health center responding?* • Rimantas Benetis, MD, PhD, Rector of the Lithuanian University of Health Sciences, Head of the Department of Cardiothoracic and Vascular Surgery, and Honorary Professor of the Republic of Kazakhstan (Lithuania) • Wolfgang Brück, Spokesman for the Board of Directors, Universitätsmedizin Göttingen, Head of Research and Teaching, Dean of the Medical Faculty, Universitätsmedizin Göttingen (Germany) • Margaret McDonald, PhD, MFA, Associate Vice Chancellor for Academic and Global Affairs, Health Sciences, Associate Professor of Epidemiology, Graduate School of Public Health, Associate Professor of Psychiatry, School of Medicine, University of Pittsburgh (USA) • Massimo Pignatelli, MD, PhD, FRCPath, AAHCI Steering Committee Past Chair, Vice President for Medicine and Dean, School of Medicine, Nazarbayev University (Kazakhstan) Facilitator: Rümeyza Kazancıoğlu, MD, Vice Chancellor, Bezmialem Vakıf University (Turkey)
3:15 PM	Coffee Break

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3:45 PM	Panel Discussion *Innovating Health Education and Healthcare Delivery - Strategies and Best Practices* • Senthil Kumar Rajasekaran, MD, MMHPE, Acting Dean, Khalifa University College of Medicine and Health Sciences (UAE) • James Shanahan, Vice President and Group Publisher, Product Development and Publishing, McGraw Hill Professional (USA) • Richard Trembath, Senior Vice-President Health and Life Sciences, King's College London; Executive Director, King's Health Partners (UK) Facilitator: Robert A. Barish, MD, Vice Chancellor for Health Affairs and Professor of Emergency Medicine, College of Medicine, University of Illinois Chicago; Board of Directors, Association of American Medical Colleges (USA)
4:45 PM	Closing Remarks *Crisis and Change: Insights from the University Hospital Zurich* • Gabriela Senti, MD, Director Research and Education, University of Zurich (Switzerland)
4:55 PM	Day One Closing Comments • Frank Rühli, MD, PhD, Dean, Faculty of Medicine, University of Zurich, AAHCI European Regional Office Ambassador (Switzerland) • Luciano Saso, PhD, Professor, Faculty of Pharmacy and Medicine, Sapienza University of Rome, Academic Guest, University of Zurich, AAHCI European Regional Office Co-Ambassador (Italy)
5:00 PM	Day 1 Ends
5:15PM	Reception: Swiss traditional chocolate event *(All attendees)*, University of Zurich Main Building, Rämistrasse 71, 8006 Zurich, floor K
7:30 PM	Dinner at Zunfthaus Zimmerleuten, Limmatquai 40, 8001 Zurich *(All attendees)*

2023 European Regional Meeting

September 7 – 8
Zurich, Switzerland

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Friday, September 8 *(All times listed are in Central European Time)*

Location: Lecture Room 01, floor G, Institute of Education, Kantonsschulstrasse 3, 8001 Zurich

8:30 AM	Keynote Presentation *Collaborating to Grow a Resilient Academic Health Center During Social Change: Univer-Cities – an Asian perspective and Singapore strategic model* Anthony Teo Soon Chye, Professor, Singapore University of Social Sciences (Singapore)
9:15 AM	Panel Discussion *Crisis Strategies and Best Practices for Academic Health Centers* • Olga Garaschuk, PhD, Chair for Neurophysiology, Eberhard Karls University of Tübingen (Germany) • Rümeyza Kazancıoğlu, MD, Vice Chancellor, Bezmialem Vakıf University (Turkey) • Alexander Pokanevych, MD, President, Kyiv Medical University (Ukraine) • Frank Rühli, MD, PhD, Dean, Faculty of Medicine, University of Zurich, AAHCI European Regional Office Ambassador (Switzerland) Facilitator: Martin Paul, MD, CEO and Rector, The Ruhr-University Bochum (Germany)
10:30 AM	Coffee Break
11:00 AM	Keynote Presentation *Communication, Trust, and Bridging the Gap Between Medicine and the Science Disciplines: Implications for Education, Research, and Patient Care* Martin Paul, MD, CEO and Rector, The Ruhr-University Bochum (Germany)
12:00 PM	Lunch

1:00 PM	**Panel Discussion** *Adapting and Adopting Innovative Models: Unique Health Systems in Europe* • Alessandro Bertani, University Of Mediterranean Institute for Transplantation and Advanced Specialized Therapies (ISMETT) (Italy) • Rachna Chowla, MD, MBA, Joint Director of Clinical Strategy, King's Health Partners, London (UK) • Angela Cooper, PhD, Director for External Partnerships, Imperial College London (UK) • Wolfgang Sperl, MD, Director of the Medical University Paracelsus, Salzburg (Austria) Facilitator: Luciano Saso, PhD, Professor, Faculty of Pharmacy and Medicine, Sapienza University of Rome, Academic Guest, University of Zurich, AAHCI European Regional Office Co-Ambassador (Italy)
2:00 PM	**Closing Remarks** • Steven L. Kanter, MD, Executive Director, Alliance of Academic Health Centers International, AAHCI, Association of American Medical Colleges, AAMC (USA) • Frank Rühli, MD, PhD, Dean, Faculty of Medicine, University of Zurich, AAHCI European Regional Office Ambassador (Switzerland)
2:15 PM	**Meeting Ends**