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On the issue of certification of Saint Petersburg healthcare system specialists (history, analysis and current trends; certification of doctors in the specialty "Healthcare organization and public health")

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ABSTRACT. ***Introduction.*** In order to improve the quality of medical and preventive care in the healthcare system the Government of the Russian Federation is taking certain steps aimed both at improving the level of professional training of medical personnel and at increasing incentives for advanced training of medical professionals. Admission of doctors to practical work is possible only after they have successfully fulfilled the mandatory accreditation procedure; a system of continuing medical education has been implemented. At the same time, a voluntary system for assessing the qualifications of both doctors and nursing staff has been introduced — certification for obtaining a qualification category regulated by the Ministry of Health. ***Aim*** — to analyze the expert activity on the certification of specialists with higher medical education in the historical aspect and its current state; to make a thorough study of the certification of doctors in the specialty "Healthcare organization and public health" for 2024 in order to develop recommendations for improving certification activities in the urban health care system organizations. ***Materials and methods.*** In order to study the formation and development of the legislative framework for certification of medical workers, the laws and orders of the Ministry of Health of the Russian Federation reflecting the organization of the certification of doctors in the XXI century were analyzed. The work of 31 attestation commissions of the St. Petersburg Health Committee was analyzed, in which 16213 doctors were certified, including 541 doctors specializing in health organization and public health ("HP HO") for 5 years. Moreover, all the attestation cases (134) of healthcare organizers for 2024 have been studied and analyzed. ***Results and discussions.*** The history of certification of medical workers in Russia goes back for more than 65 years. Using the example of the work of the attestation commission in the specialty "HP HO" for 2024, the main trends of this procedure have been identified. Such characteristics of certified specialists as their position, place of work, gender, age, work experience in an organizational specialty, academic degree, and others are considered. Special attention was paid to the issues of professional development and test results. Thus, higher scores (90 and above) were obtained by the heads of medical institutions and organizations with proper training in their specialty (residency, academic degree), who regularly upgrade their qualifications according to the "classical program" (144 hours) in medical universities and research centers. The expert activity of the reviewer was analyzed based on the reports of the attested persons alongside the analysis of comments. The structure and work of the expert commission on the specialty "HP HO" are highlighted in detail. Of all those certified in this specialty in 2024, 10.4% were assigned the II qualification category, 23.1% of the I category, and 66.5% of the highest

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category. Along with solving a number of organizational problems of the certification procedure for doctors (Medical Information and Analytical Center electronic information systems have been installed to optimize the conditions for submitting documents by doctors, as well as to improve the effectiveness of expert groups), the problems of involving medical professionals in the certification procedure remain being insufficiently solved. ***Conclusion.*** Certification of medical personnel is one of the ways of state control over the quality of specialist training. Attestation is not considered to be a substitute for the accreditation procedure, which is a mandatory element of admission to professional activity. A qualification category is a practical assessment of a specialist's performance and level of qualification. Among the problems of certification, a group of organizational problems should be highlighted, the quality of training and advanced training of doctors, encouraging medical professionals to participate in certification in order to improve the level of medical and preventive care in general, and other issues outlined in the article.

KEYWORDS: certification, specialists, doctors-organizers of healthcare, professional development

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К вопросу об аттестации специалистов системы здравоохранения Санкт-Петербурга (история, анализ и современные тенденции; аттестация врачей по специальности «Организация здравоохранения и общественное здоровье»)

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РЕЗЮМЕ. ***Введение.*** В Российской Федерации в системе здравоохранения в целях повышения качества оказания медико-профилактической помощи государство предпринимает определенные шаги, направленные как на улучшение уровня профессиональной подготовки медицинских кадров, так и на усиление стимулов к повышению квалификации медицинских специалистов. Допуск медиков к практической работе возможен только после прохождения ими обязательной процедуры аккредитации; внедрена система непрерывного медицинского образования. Одновременно введена добровольная система оценки квалификации как врачей, так и среднего медицинского персонала, регулируемая Минздравом России, — аттестация на получение квалификационной категории. ***Цель*** — проанализировать экспертную деятельность по аттестации специалистов с высшим медицинским образованием в историческом аспекте и в современной ситуации; углубленно изучить аттестацию врачей по специальности «Организация здравоохранения и общественное здоровье» за 2024 год для разработки рекомендаций по совершенствованию аттестационной деятельности в системе городского здравоохранения. ***Материалы и методы.*** В целях изучения становления и развития законодательной базы аттестации медицинских работников были проанализированы законы и приказы Министерства здравоохранения Российской Федерации, отражающие организацию аттестации врачей в XXI веке. Проанализирована работа 31 аттестационной комиссии Комитета по здравоохранению Санкт-Петербурга, в которых прошли аттестацию 16 213 врачей, в том числе 541 врач по специальности «Организация здравоохранения и общественное здоровье» («ОЗ ОЗ») за 5 лет. Причем углубленно изучены все аттестационные дела (134) врачей — организаторов здравоохранения за 2024 год. ***Результаты и обсуждения.*** История аттестации медицинских работников в России насчитывает более 65 лет. На примере работы аттестационной комиссии по специальности «ОЗ ОЗ» за 2024 год выявлены основные тенденции этой процедуры. Рассмотрены такие характеристики

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аттестованных специалистов, как занимаемая должность, место работы, пол, возраст, стаж работы по организационной специальности, наличие ученой степени и др. Особое внимание было уделено вопросам повышения квалификации и результатам тестирования. Так, более высокие баллы (90 и выше) по итогам тестирования получили руководители медицинских учреждений и организаций, имеющих хорошую подготовку по специальности (ординатура, ученая степень), регулярно повышающие свою квалификацию по «классической» программе (144 ч) в медицинских вузах и научных центрах. Была проанализирована экспертная деятельность рецензента по отчетам аттестуемых с анализом замечаний. Подробно освещена структура и работа экспертной комиссии по специальности «ОЗ ОЗ». Из всех аттестованных по этой специальности за 2024 год II квалификационная категория была присвоена 10,4%, I категория — 23,1%, а высшая категория — 66,5%. Наряду с решением ряда организационных проблем процедуры аттестации врачей (установлены электронные информационные системы Медицинского информационно-аналитического центра для оптимизации условий подачи документов врачами, а также для повышения результативности работы экспертных групп) остаются недостаточно решенными проблемы вовлеченности медицинских работников в процедуру аттестации. ***Заключение.*** Аттестация медицинского персонала является одним из способов государственного контроля над качеством подготовки специалистов. Аттестация не подменяет процедуру аккредитации, которая является обязательным элементом допуска к профессиональной деятельности. Квалификационная категория — это практическая оценка результатов деятельности специалиста и уровня его квалификации. Среди проблем аттестации следует выделить группу организационных проблем, качество подготовки и повышения квалификации врачей, стимулирование медицинских работников к участию в аттестации в целях повышения уровня медико-профилактической помощи в целом и другие вопросы, изложенные в статье.

КЛЮЧЕВЫЕ СЛОВА: аттестация, врачи — организаторы здравоохранения, повышение квалификации

Источник финансирования. Авторы заявляют об отсутствии внешнего финансирования при проведении исследования.

INTRODUCTION

In our country, the population's need for accessible, high-quality medical care requires both improving the training of new personnel and strengthening incentives for the continuing professional development of practicing medical specialists. The state is taking certain steps. First, medical professionals are now permitted to practice only after undergoing accreditation (instead of the previous certification system). Second, a system of Continuing Medical and Pharmaceutical Education (CME, known in Russia as NMO) has been introduced to ensure the level of knowledge and skills required for this accreditation. In addition to mandatory accreditation, there is another competency assessment mechanism regulated by the Ministry of Health of the Russian Federation — certification of physicians and mid level specialists for a qualification category. This mechanism operates on a voluntary basis. This certification aligns with the concept of continuing professional development. Its main objectives are twofold. First, to stimulate the professional growth and responsibility of medical professionals for the quality of their duty performance. Second, to stratify them according to their level of professionalism for better staff allocation by granting access to more complex work, including leadership positions. As stipulated in Article 72 of the Law "On the Fundamentals of Protecting the Health of Citizens in the Russian Federation" (No. 323 FZ of November 21, 2011)[1], this certification gives individuals the right, after completing the required examination procedures, to obtain a category (second, first, or highest) and to qualify for corresponding salary supplements.

AIM

The aim of the study was to develop recommendations for improving certification activities in the city healthcare system based on an analysis of expert assessments of the certification of specialists with higher medical education, including physicians in the specialty "Healthcare Organization and Public Health".

MATERIALS AND METHODS

In order to study the formation and development of the legislative framework of modern Russia in the field of certification of medical workers, the following were analyzed:

- the Law of the Russian Federation No. 324 FZ of November 21, 2011 "On the Fundamentals of Protecting the Health of Citizens in the Russian Federation";
- the main orders of the Ministry of Health of the Russian Federation reflecting the organization of certification in Russia in the 21st century, including: Order No. 314 of August 9, 2001 "On the Procedure for Obtaining a Qualification Category"[2]; Order No. 808n of July 25, 2011 "On the Procedure for Obtaining Qualification Categories by Medical and Pharmaceutical Workers"[3]; Order No. 240n of April 23, 2013 "On the Procedure and Timing for Medical and Pharmaceutical Workers to Undergo Certification to Obtain a Qualification Category"[4]; Order No. 394n of April 30, 2020 "Special Features of Medical and Pharmaceutical Workers Undergoing Certification to Obtain a Qualification Category"[5]; Order No. 41n of February 2, 2021 "On Special Features of Medical and Pharmaceutical Workers Undergoing Certification to Obtain a Qualification Category in 2021"[6]; Order No. 1083n of November 22, 2021 "On the Procedure and Timing for Medical and Pharmaceutical Workers to Undergo Certifi-

[1] Federal Law No. 323 FZ of November 21, 2011 "On the Fundamentals of Protecting the Health of Citizens in the Russian Federation" (as amended). Available at: https://minzdrav.gov.ru/documents/7025 (accessed: November 15, 2025).

[2] Order No. 314 of the Ministry of Health of the Russian Federation of November 9, 2001 "On the Procedure for Obtaining a Qualification Category". Available at: https://base.garant.ru/4177721/ (accessed: November 15, 2025).

[3] Order No. 808n of the Ministry of Health and Social Development of the Russian Federation of July 25, 2011 "On the Procedure for Obtaining Qualification Categories by Medical and Pharmaceutical Workers". Available at: https://www.garant.ru/products/ipo/prime/doc/12090108/ (accessed: November 15, 2025).

[4] Order No. 240n of the Ministry of Health of the Russian Federation of April 23, 2013 "On the Procedure and Timing for Medical and Pharmaceutical Workers to Undergo Certification to Obtain a Qualification Category". Available at: https://base.garant.ru/70412100/ (accessed: November 15, 2025).

[5] Order No. 394n of the Ministry of Health of the Russian Federation of April 30, 2020 "Special Features of Medical and Pharmaceutical Workers Undergoing Certification to Obtain a Qualification Category". Available at: https://base.garant.ru/73976163/ (accessed: November 15, 2025)..

[6] Order No. 41n of the Ministry of Health of the Russian Federation of February 2, 2021 "On Special Features of Medical and Pharmaceutical Workers Undergoing Certification to Obtain a Qualification Category in 2021". Available at: https://www.garant.ru/products/ipo/prime/doc/400184898/ (accessed: November 15, 2025).

cation to Obtain a Qualification Category"[1]; Order No. 59n of February 7, 2022 "On Special Features of Medical and Pharmaceutical Workers Undergoing Certification to Obtain a Qualification Category"[2]; Order No. 458n of August 31, 2023 "On Approving the Procedure and Timing for Medical and Pharmaceutical Workers to Undergo Certification to Obtain a Qualification Category"[3];

- Order No. 332 r of August 26, 2016 of the Health Committee of Saint Petersburg "On Approving the Regulations on the Remuneration of Employees of State Healthcare Institutions of Saint Petersburg"[4].

In addition, to study the history and comparison of the certification procedure in our country, certain legislative acts of the Soviet period were reviewed.

The status, achievements, and some problems of physician certification were analyzed based on a study of the work of 31 certification commissions (referred to as "attestation commissions" in the abstract and in the tables below) established by the Health Committee of Saint Petersburg over recent years. Certification activities in the specialty "Healthcare Organization and Public Health" (HOPH; referred to as "HP HO" in the abstract) were examined in greater depth.

Over five years (2020–2024), the certification files of 541 specialists who underwent certification in the specialty "HOPH" were studied, as well as annual reports on certification results.

All certification files for 2024 (134 files) were studied in greater depth. These included certification sheets of specialists, reports on professional activities, copies of accreditation certificates, copies of documents confirming academic degrees (if any), and extracts from employment records confirming position and length of service in the specialty being certified.

In addition, all minutes of meetings of the Expert Group in the specialty "HOPH" for 2024 were analyzed.

The results obtained were analyzed using parametric statistics methods (calculation of extensive indicators, reliability of differences between means, etc.).

RESULTS AND DISCUSSION

Certification for a qualification category has its roots in the Soviet healthcare system, and its introduction into practice was a unique social innovation. However, recently the number of medical specialists holding a category has been declining, and criticism has emerged within the medical community regarding the loss or, at the very least, weakening of its intended purpose [1].

The history of certification of medical and pharmaceutical workers to obtain a qualification category spans more than 65 years. Categories were introduced into the national healthcare system in the early 1960s [2]. They were awarded based on length of service in the specialty, the volume and quality of work results, completion of specialization courses, advanced training and other forms of professional development (including on the job training), published works, and other criteria. When awarding categories, it was recommended to observe their sequence, i.e., progression through the steps of professional growth, while the flow of candidates was regulated because the Ministry of Health had budget limitations for these purposes [3].

In 1964, a system of professional categories for physicians was adopted, the main provisions of which were regulated by the "Regulations on the Certification of Medical Specialists", which established the first and highest physician categories. Obtaining and renewing categories was voluntary, and the state provided material incentives for

[1] Order No. 1083n of the Ministry of Health of the Russian Federation of November 22, 2021 "On the Procedure and Timing for Medical and Pharmaceutical Workers to Undergo Certification to Obtain a Qualification Category". Available at: https://www.garant.ru/products/ipo/prime/doc/403037045/ (accessed: November 15, 2025).

[2] Order No. 59n of the Ministry of Health of the Russian Federation of February 7, 2022 "On Special Features of Medical and Pharmaceutical Workers Undergoing Certification to Obtain a Qualification Category". Available at: https://www.garant.ru/products/ipo/prime/doc/403401536/ (accessed: November 15, 2025).

[3] Order No. 458n of the Ministry of Health of the Russian Federation of August 31, 2023 "On Approving the Procedure and Timing for Medical and Pharmaceutical Workers to Undergo Certification to Obtain a Qualification Category". Available at: https://www.garant.ru/products/ipo/prime/doc/407680878/ (accessed: November 15, 2025).

[4] Order No. 332-r of the Health Committee of Saint Petersburg of August 26, 2016 "On Approving the Regulations on the Remuneration of Employees of State Healthcare Institutions of Saint Petersburg". Available at: http://zdrav.spb.ru/media/komzdrav/documents/document/file/rasp_332-r.pdf (accessed: November 15, 2025).

medical workers holding a category. In turn, heads of medical organizations gained a fairly effective management tool.

In 1970, the second professional category was introduced into the regulatory framework for certification, as well as certification of mid level medical personnel. In the 1980s, the Ministry of Health undertook measures to introduce not only voluntary but also mandatory certification of specialists. This mandatory certification was abolished in 1995. In 2001, Order No. 314 of the Ministry of Health of the Russian Federation of August 9, 2001 "On the Procedure for Obtaining Qualification Categories" came into force. Under this order, the main principles for awarding categories remained assessment of the report and an interview. In 2011, Order No. 808n of the Ministry of Health and Social Development of the Russian Federation of July 25, 2011 "On the Procedure for Obtaining Qualification Categories by Medical and Pharmaceutical Workers" came into force. This order regulated the activities of certification commissions in more detail and more clearly compared to previous documents. From 2013, the procedure and timing for medical workers to undergo certification to obtain a qualification category were regulated by Order No. 240n of the Ministry of Health of the Russian Federation of April 23, 2013 "On the Procedure and Timing for Medical and Pharmaceutical Workers to Undergo Certification to Obtain a Qualification Category". In 2021, Order No. 1083n of the Ministry of Health of the Russian Federation of November 22, 2021 "On the Procedure and Timing for Medical and Pharmaceutical Workers to Undergo Certification to Obtain a Qualification Category" came into force. Under this order, certification of medical and pharmaceutical workers to obtain a qualification category was suspended until January 1, 2023. The only exceptions were certification for the award of a category for the first time and for obtaining a higher category (paragraph 1 of Order No. 59n of the Ministry of Health of the Russian Federation of February 7, 2022 "On Special Features of Medical and Pharmaceutical Workers Undergoing Certification to Obtain a Qualification Category"). In accordance with Order No. 59n, the validity period of qualification categories was extended by 12 months when their validity expired between January 1 and December 31, 2022 (paragraph 3). The validity period of awarded categories was also extended by 12 months. These categories had previously been extended between February 1, 2020, and January 1, 2021 in accordance with Order No. 394n of the Ministry of Health of the Russian Federation of April 30, 2020 "Special Features of Medical and Pharmaceutical Workers Undergoing Certification to Obtain a Qualification Category". This extension was then further prolonged until January 1, 2022 in accordance with Order No. 41n of the Ministry of Health of the Russian Federation of February 2, 2021 "On Special Features of Medical and Pharmaceutical Workers Undergoing Certification to Obtain a Qualification Category in 2021".

Currently, certification of medical and pharmaceutical workers is regulated by Order No. 458n of the Ministry of Health of the Russian Federation of August 31, 2023 "On Approving the Procedure and Timing for Medical and Pharmaceutical Workers to Undergo Certification to Obtain a Qualification Category".

The certification rules have been repeatedly revised towards greater standardization. These rules include testing according to approved programs, expert assessment of a qualification paper, and an interview. Requirements for certification commissions have been tightened, and access to certification for early career professionals has been expanded: three years of experience are required to obtain the second category, five years for the first category, and seven years for the highest category.

Order No. 458n of the Ministry of Health of the Russian Federation introduced other changes in addition to the length of service requirement for the specialty. Specifically, it is now possible to apply for a higher category no earlier than two years after the previous category was awarded. In addition, the report may include data from one year that had already been assessed for the existing category and two subsequent years that had not been assessed for certification purposes. The requirements for the report on professional activities have been expanded. In addition to assessing proficiency in modern methods of diagnosis and treatment, the report now must cover prevention, rehabilitation, medical diagnostic techniques in the field of professional activity, and forms of self education used by the specialist. The requirements for each qualification category (second, first, and highest) have been specified in detail. The requirements for members of expert groups of certification commissions have also been updated. An application for certification can be submitted regardless of the length of

time worked at an institution, as well as during parental leave. If a specialist has worked for several employers during the reporting period, several certified reports from different employers may be submitted. A specialist holding a qualification category must submit documents to the commission no later than 91 working days before the category expires. Specialists with higher non medical education have been added (certification is based on the position held). Graduates of foreign educational institutions may obtain a category only if they have work experience in the Russian Federation on the same general basis as citizens of the Russian Federation.

In recent years, certification has motivated only a small proportion of medical personnel — specifically, those for whom it resulted in positive changes either in the nature of their work (more interesting and meaningful duties, career advancement) or in their level of remuneration [4].

The decline in the number of specialists participating in certification can be attributed to changes in the system of material incentives. The abolition of the Unified Tariff Schedule and the transition to new systems of remuneration (NSR) in the public sector altered the role of salary supplements for holding a category. The introduction of the NSR was intended to increase the share of incentive payments in total remuneration and to tie them more closely to current work performance. Sociological studies have shown that the supplement for a category has become negligible compared to incentive payments [5].

Disincentivization of professional growth is the primary factor underlying the dysfunction of the certification institution. Following the abolition of the Unified Tariff Schedule and the transition to the new remuneration system for public sector employees on December 1, 2008, heads of medical institutions were granted the authority to manage payroll and reward the most qualified employees. The previously mandatory and fixed supplements for a qualification category began to be paid as incentive payments, the amount of which became determined at the local level. How effective have these new material incentives been in encouraging medical personnel to participate in certification? The transition to the new remuneration system and the introduction of effective contracts — implemented as part of the Presidential May Decrees — have largely led to a loss of the former significance of bonuses for a category. Although recommended bonus amounts relative to the official salary are specified in regulatory documents, the actual payments reported by experts during interviews were very small. Assessing the situation in their medical organizations, they spoke of the reluctance of most colleagues to "bother with certification" [6].

Currently, in Saint Petersburg, salary supplements for qualification categories for medical and pharmaceutical workers are regulated by Order No. 332 r of the Health Committee of Saint Petersburg of August 26, 2016 "On Approving the Regulations on the Remuneration of Employees of State Healthcare Institutions of Saint Petersburg". This order establishes a qualification

Table 1

Distribution of certified specialists with higher education in the attestation commissions of St. Petersburg by year (from 2020 to 2024) in %

Таблица 1

Распределение аттестованных специалистов с высшим образованием в аттестационных комиссиях КЗ СПб по годам (с 2020 по 2024 гг.) в %

Год Year	Аттестованные специалисты Certified specialists			
	общее число total number		по специальности «Общественное здоровье и здравоохранение» in the specialty "Public health and healthcare"	
	абс. число (человек) total number (people)	%	абс. число (человек) total number (people)	%
2020	501	3,1	13	2,4
2021	3088	19,0	108	20,0
2022	2451	15,1	101	18,7
2023	5797	35,8	185	34,2
2024	4376	27,0	134	24,7
Итого Total	16 213	100,0	541	100,0

Таблица составлена по данным собственного исследования авторов / The table is based on data from the authors' own research

coefficient of 0.33 of the base salary for the highest category, 0.20 for the first category, and 0.10 for the second category.

The second most significant reason for the decline in the number of medical and pharmaceutical workers participating in certification is high workload and lack of time. The increased work intensity characteristic of modern healthcare has worsened conditions for preparing for and participating in assessment procedures [1].

Over five years (2020–2024), a total of 16,213 specialists with higher education were certified by the certification commissions of the Health Committee of Saint Petersburg, including 541 specialists in the specialty "Healthcare Organization and Public Health". Table 1 shows the distribution of certified specialists by year.

As can be seen from Table 1, the same patterns are observed among both all certified specialists and those certified in the specialty "HOPH". The lowest proportion of certified specialists was recorded in 2020 — the peak of the COVID 19 pandemic and the moratorium on certification commission activities. The highest proportion was recorded in 2023 (38.8% and 34.2%) following the lifting of the moratorium. The high proportion in 2024 can also be explained by "pent up demand" for obtaining certification categories, as it was impossible to obtain them during the pandemic years.

Among the 31 expert groups within the certification commissions of the Health Committee of Saint Petersburg, a certification commission for the specialty "HOPH" has been functioning for many years. This commission certifies heads of medical organizations and institutions, their deputies, heads of departments and divisions, heads of organizational and methodological units and medical statistics units, as well as medical methodologists and medical statisticians. During the period studied, the permanent membership of the commission included the following individuals. The Chairs of the Commission were the Chair of the Health Committee of Saint Petersburg, the First Deputy Chair, and the Deputy Chair. Other members included the Chief Freelance Specialist for Healthcare Organization and Public Health of the Health Committee of Saint Petersburg, who is also Head of the Department of Public Health and Healthcare at Pavlov First Saint Petersburg State Medical University, Doctor of Medical Sciences, Professor. The commission also included the Head of the Department of Information and Technical Support for the Preparation of Certification of Specialists in the Saint Petersburg Healthcare System, Medical Methodologist at the Saint Petersburg State Budgetary Healthcare Institution "Medical Information and Analytical Center", as well as the Director of the same institution. Other members were the Head of the Civil Service and Personnel Division of the Health Committee of Saint Petersburg, as well as the Head of the Department of Medical Care Organization, Leading Researcher at the Federal State Budgetary Institution "Children's Scientific and Clinical Center for Infectious Diseases of the Federal Medical and Biological Agency of Russia" (DNKTsIB), Professor at the Department of Pediatrics of the North-Western State Medical University named after I.I. Mechnikov, Doctor of Medical Sciences. The commission also included the Chief Physician of the Saint Petersburg State Public Health Institution "City Blood Transfusion Station".

In addition, in various years, the membership of the certification commission for the specialty "HOPH" included (variable composition): the Head of the Department of Orthopedic Dentistry and Materials Science with a Course in Orthodontics at Pavlov First Saint Petersburg State Medical University, Doctor of Medical Sciences, Professor. Other members included the Chief Freelance Specialist in Pediatrics of the Health Committee of Saint Petersburg, Doctor of Medical Sciences, Professor. The commission also included the Chief Freelance Specialist in Psychiatry of the Health Committee of Saint Petersburg, Chief Physician of the Saint Petersburg State Public Health Institution "City Psychiatric Hospital No. 3 named after I.I. Skvortsov-Stepanov", Doctor of Medical Sciences, Professor; and the Chief Physician of the Saint Petersburg State Budgetary Healthcare Institution "City Polyclinic No. 56". Thus, the composition of the certification commission reflects various aspects of the work of physician organizers of healthcare and is capable of providing a qualified, objective, and comprehensive assessment of this work.

The reduction in the number of commission members (to 10 people in 2024) was necessitated by the need to optimize and intensify the certification work for heads of medical organizations.

To characterize and analyze the results of the commission's work in the specialty "HOPH", we comprehensively studied various parameters of certification activities for 2024 using a special program. A total of 159 applications for certification and obtaining a qualification category

were submitted to the certification commission during the year. However, 25 applicants (15.7%) were refused acceptance of their documents for various reasons. The reasons for refusal were as follows:

- insufficient length of service (to obtain the second qualification category, at least three years of experience in the specialty are required; for the first category, at least five years; and for the highest category, at least seven years) — 35% of refusals;
- violation of the document submission period (less than two years or less than five years had passed since the previous category was awarded) — 25% of refusals;;
- the position held did not correspond to the specialty “HOPH” — 20% of refusals;
- an incomplete set of documents was provided — 20% of refusals.

Among those admitted to the testing stage (134 individuals), the majority were specialists holding the following positions: deputy chief physician — 40.3%; a substantial group of those certified consisted of medical methodologists, medical statisticians, heads of organizational and methodological departments, and heads of medical statistics units — 29.1%; in third place were chief physicians (directors) — 26.9%; the remaining specialists represented other positions that may be certified in healthcare organization — 3.7%.

In terms of sex and age distribution, women accounted for 56.7% of those certified. The predominant age groups were 46–55 years (37.3%) and 56–65 years (26.1%). Only 4.5% of those certified in healthcare organization were under 35 years of age, which is understandable given the length of service required in the specialty "HOPH". At the same time, nearly 25% of those certified were over 65 years old.

Encouragingly, more than one third of those certified (34.3%) held an academic degree: 24.6% were Candidates of Medical Sciences (a research degree roughly equivalent to a PhD), and 9.7% were Doctors of Medical Sciences (a higher research degree beyond the PhD, specific to the Russian system). Among chief physicians, 61.1% held an academic degree (38.9% Candidates and 22.2% Doctors of Medical Sciences). Among deputy chief physicians, 27.7% held an academic degree (22% Candidates and 5.7% Doctors of Medical Sciences). Such a high proportion of heads of medical institutions and organizations with academic degrees clearly reflects the strong qualifications of managerial personnel, as well as their ability to analyze using both managerial experience and scientific approaches and methods.

Regarding work experience, 70.9% (more than two thirds) of certified specialists had worked in the specialty “Healthcare Organization” for 6 to 25 years, including one third (29.1%) for 16 to 25 years. Nearly one in ten (9.7%) had worked in the specialty for over 25 years. Among chief physicians, the vast majority (75%) had worked in an organizational specialty for 6 to 25 years, and almost 14% had done so for over 25 years. The work experience of deputy chief physicians was shorter: 70% had worked in an organizational position for up to 15 years, including more than one quarter (26.4%) for up to 5 years; 22.6% had worked for 16 to 25 years, and 7.4% for over 25 years. These age characteristics of managers and their deputies are quite natural, as deputy chief physicians often serve as candidates for higher managerial positions.

The place of work of those certified is also noteworthy. Thus, 46.3% (almost half) worked in outpatient and polyclinic facilities; slightly fewer (38.1%) worked in inpatient facilities; 3.0% worked in the emergency medical care system; and 12.6% worked in other settings (sanatoriums, etc.).

As noted earlier, the first stage of certification requires those admitted to complete test assignments. The testing procedure is well established and conducted online. Candidates must answer 60 test questions within 60 minutes. In 2020, the staff of the Department of Public Health and Healthcare with a Course in Health Economics and Management at Pavlov First Saint Petersburg State Medical University developed 393 tests. These are divided into two parts. The first

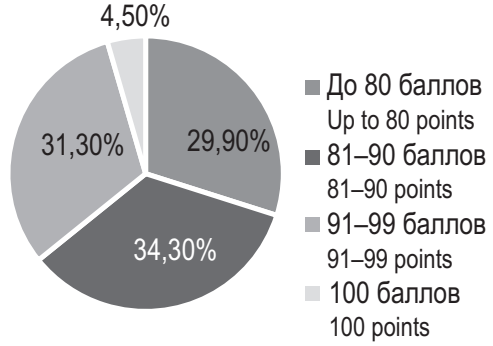

Fig. 1. Distribution of certified specialists according to the test results (the figure is developed by the authors)

Рис. 1. Распределение аттестованных специалистов по результатам тестирования (рисунок разработан авторами)

Table 2

Distribution of certified specialists of different positions based on the results of the tests taken (as a percentage of the total)

Таблица 2

Распределение аттестованных специалистов разных должностей по итогам сданных тестов (в % к итогу)

Должность Post	Результаты тестирования Test results			
	до 80 баллов up to 80 points	81–90 баллов 81–90 points	91–100 баллов 91–100 points	итого total
Главные врачи (директора) и их заместители Chief Medical Officers (Directors) and their deputies	16,0	41,5	42,5	100,0
Врачи-методисты и врачи-статистики Methodologists and statisticians	63,6	15,2	21,2	100,0
Итого Total	29,9	34,3	35,8	100,0

Таблица составлена по данным собственного исследования авторов / The table is based on data from the authors' own research

part covers general questions on "Healthcare Organization and Public Health". It includes six sections: population health, legal foundations of healthcare in the Russian Federation, legal foundations of municipal activities, general issues of medical care organization, health insurance organization, and quality control of medical care. The first part consists of 61 tests.

The second part of the test assignments for certification in the specialty "Healthcare Organization and Public Health" is titled "Test Assignments Concerning the Activities of Various Medical Organizations". It consists of 11 sections: primary health care; specialized, including high tech, medical care; obstetric and gynecological care; preventive care for children; medical care for tuberculosis, mental disorders, etc. The second part includes 332 tests. The tests are supplemented and updated annually.

The following criteria for evaluating test results have been adopted: if 70% of answers are correct, the candidate is considered to have passed the testing stage and may be admitted to the next stage of certification — an interview with the relevant certification commission.

The results of our analysis of testing outcomes are presented in Figure 1.

Heads of medical organizations (chief physicians and their deputies) performed significantly better on the tests than medical statisticians and medical methodologists (Table 2).

Among candidates with an academic degree (Candidate and Doctor of Medical Sciences), there were significantly more ($p < 0.05$) correct answers (91–100) — 41.3%, whereas among candidates without an academic degree, this figure was only 33.4%. In light of these test results, we examined issues related to the continuing professional development of candidates during the five year period preceding their certification commission. It is known that continuing education courses (144 hours) delivered at medical universities and state research centers provide more "classical" training in various aspects of healthcare organization and public health. This includes medical statistics methods widely used in practical healthcare to analyze the performance of medical personnel, organization, etc. It also covers the legal foundations of health protection and appropriate methods for studying population health, including modern approaches to reducing mortality and increasing birth rates. In addition, it addresses new approaches to preventive health checkups: screening of reproductive age citizens to assess reproductive health, follow up observation of working citizens, and follow up observation of combat veterans. New directions in the activities of outpatient and inpatient facilities, emergency medical care, and specialized types of medical care are also studied. The same applies to new regulations on disability assessment and compulsory health insurance. Economic issues in healthcare, medical marketing, and management are also covered.

Only 54.5% of certified specialists had completed continuing professional development courses (144 hours) at medical universities and research centers. Another 11.9% combined university based training with short term specialized courses and cycles offered by various limited liability companies (LLCs), autonomous non profit organizations (ANOs), and other entities. Meanwhile, one third (33.6%) of certified specialists submitted documents showing that they had taken only short term courses provided by LLCs,

ANOs, and other commercial structures. Analysis of test results revealed that those who had followed the "classical" 144 hour training programs at universities and research centers performed significantly better than those who had taken various short term commercial courses. In the first group, 43.6% scored above 91 points on the test, compared to only 31% in the second group (commercial courses; $p < 0.05$).

After passing the testing stage, the candidate's personal file, including a report on their activities over the past three years, is submitted for an expert opinion to the Chief Freelance Specialist for Healthcare Organization and Public Health.

After expert review, the vast majority of certification files are forwarded to the certification commission with the conclusion that the candidate "meets" the relevant qualification category. However, each year, 2–3% of all reviewed files are either returned for revision, supplementation, or correction, or are rejected for various reasons — most commonly because the three year activity report does not align with the category applied for. Frequent expert comments include insufficient proficiency in medical statistics methods commonly used in practical healthcare, lack of analysis of the submitted factual data, inability to clearly formulate conclusions and future objectives, and other observations. Long term expert experience indicates that three year activity reports are better prepared by candidates who have completed residency training and continuing professional development courses (144 hours) at medical universities and state research centers.

The final stage of certification is an interview with the expert commission in the specialty "HOPH". Candidates are asked questions that primarily relate to their direct professional activities, their personal achievements during the reporting period, and the achievements of the organization where they work. Based on the results of the 2024 interviews with the "HOPH" certification commission, only 3 individuals (2.2%) were not certified, for various reasons.

Of all those certified, 10.4% were awarded the second qualification category, 23.1% received the first category, and 66.5% received the highest category. The proportion receiving the highest category was greatest among chief physicians — 82.4%. While no chief physicians held the second category, among medical statisticians and methodologists, 18.2% (one in six) did (Table 3).

Overall, in Saint Petersburg's city medical institutions and organizations as of early 2025, just over half (54.7%) of chief physicians (directors) and their deputies held qualification categories: 78.7% held the highest category, 18.2% the first, and 3.1% the second. Clearly, further efforts are needed to engage more managers, their deputies, heads of organizational and methodological departments, and medical statisticians in continuous professional development — both by improving the quality of specialist training and by strengthening incentives for their professional advancement.

At the same time, obtaining a category today no longer always offers the same benefits for professional growth that provides "access" to more skilled work, representing another factor contributing to the dysfunction of the certification institution. Thus, as noted earlier, certification has ceased to play as significant a role in the system

Table 3

Distribution of certified doctors by assigned qualification categories in the specialty "Healthcare organization and public health" for 2024 (as a percentage of the total)

Таблица 3

Распределение аттестованных врачей по присвоенным квалификационным категориям по специальности «Организация здравоохранения и общественное здоровье» за 2024 г. (в % к итогу)

Должность **Post**	**Категория** **Category**			
	II	**I**	**высшая** **higher school**	**итого** **total**
Главный врач (директор) Chief Medical Officer (Director)	–	17,6	82,4	100,0
Заместители главного врача Deputy Chief Medical Officer	15,0	31,0	54,0	100,0
Врачи-методисты, врачи-статистики Methodologists, statisticians	18,2	22,8	59,0	100,0
Итого Total	10,4	23,1	66,5	100,0

Таблица составлена по данным собственного исследования авторов / The table is based on data from the authors' own research

of motivations oriented toward professional career advancement as it once did.

Experts also identified a decline in interest among both senior and immediate supervisors regarding their staff's participation in certification as a factor contributing to low physician engagement. In some cases, category candidates cited well documented instances where management not only failed to support them but actively obstructed the process — by refusing to let them take the test, declining to sign the written report, and other actions. Consequently, administrative oversight of timely certification has weakened, and the responsibility for initiating category acquisition or renewal has increasingly shifted to the specialists themselves. This finding is consistent with the results of several studies [7, 8].

To resolve organizational issues in the certification process, the Medical Information and Analytical Center (MIAC) — particularly its Department of Information and Technical Support — along with the Health Committee of Saint Petersburg, are taking steps to improve and optimize document submission for specialists. They also aim to make expert group meetings more effective and convenient. Specifically, in February 2017, the Department introduced an "Electronic Queue" terminal, which helped manage visitor flows (document submission, certification result issuance, and specialist consultations). In September 2017, the MIAC launched the "Distance Learning" electronic resource for healthcare specialists in Saint Petersburg (dist.edu.spbmiac.ru). Since 2020, specialists have been taking computer based tests in their certified specialty remotely. In September 2023, the MIAC developed and implemented the information system "Certification of Medical Workers of Saint Petersburg". This system enables scheduling of document submissions for certification, tracking of document progress and certification results, and automatic report generation. For the convenience of specialists, an information resource has also been created at zdrav.spb.ru (the official website of the Health Committee — Territorial Certification Commission). This resource provides up to date information on the procedure and deadlines for document submission, document templates, and certification outcomes.

CONCLUSION

Certification of medical personnel represents one of the state's mechanisms for controlling the quality of specialist training. Obtaining a qualification category is a right, not an obligation, of medical workers.

Certification does not replace the accreditation procedure, which is a mandatory requirement for admission to professional practice. A qualification category provides a practical assessment of a specialist's performance and skill level, bringing financial rewards and enhancing the standing of both the individual specialist and their medical organization.

Thus, our analysis allows us to highlight the positive aspects of certification for healthcare professionals. The adoption of unified methodological approaches proposed by the Ministry of Health of the Russian Federation would help optimize this important work. An expert opinion serves as a solid foundation for improving the effectiveness of certification commissions amid healthcare reform, where accuracy and impartiality are increasingly valuable. Moreover, the certification methodology must rely on clear regulatory frameworks covering all aspects of a specialist's work — organizational, legal, and economic. Ultimately, a qualification category recognizes a specialist's practical achievements and attests to their professionalism, bringing both material rewards and enhanced prestige to the medical professional and their organization alike.

The analysis of certification experience in the specialty "HOPH" has revealed not only certain achievements but also serious problems, many of which are characteristic of physician certification in other specialties. Currently, 31 expert commissions operate across all major medical specialties within Saint Petersburg's medical worker certification system. Key problems include organizational issues, the quality of physician training and continuing professional development, incentives for medical workers to participate in certification to improve the overall standard of medical and preventive care, as well as other matters discussed in this article. Resolving these problems would help achieve the outcomes originally established and developed within the certification system for medical personnel in Russian healthcare.

ADDITIONAL INFORMATION

Authors' contribution. Vishnyakov N.I. — writing and editing the text, and developing proposals for implementation; Nagnoina I.G., Smirnova E.V. — collecting and processing the

material, statistical processing, searching for material on the history, and editing the text; Sarana A.M. — concept of the article, editing the text, and developing proposals for implementation.

All authors read and approved the final version before publication.

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