

Report of the NCHPE, 2015 at Maulana Azad Medical College, New Delhi

The 7th NCHPE was held in Maulana Azad Medical College from 18th to 21st November, 2015 and nearly 250 health profession education expert, educators, faculty members and students attended the conference. The theme of the conference was “quality assurance and accreditation in medical education”. The Chief Guest of inauguration was Prof. Ved Prakash, Chairman,UGC. He emphasized the importance of research in Medicine and Medical education in his speech. Guest of Honour, Mr. Amar Nath, the secretary Health and Family Welfare, Govt. Of NCT of Delhi mentioned the need of improving quality of Medical care and importance of quality of Medical education in overall improvement of Medical care in the Country. It had six key note addresses, six symposiums, one panel discussion, oral paper presentation and poster presentation session.

Dr. Stefan Lindgren, Prof of Medicine, Lund university, Sweden and past president of WFME in his keynote address discussed about WFME standard and explained why adhering to this standard is important in global context, particularly when huge number of doctors go and treat the patients in other countries and doctors often gets training abroad and practice in home country. He mentioned about the need of limited flexibility to this standard to cater local needs.

Dr Titi Savitri Prihatiningsih Senior adviser to WFME in the key note address through teleconference shared the experiences of building a creditable accrediting system for medical institutions in Indonesia. She elaborated the credibility, public accountability, transparency, financial viability issues and told how that improved the quality of medical education in Indonesia.

Dr. Sethuraman KR, Vice Chancellor of Sri Balaji Vidyapeeth at Pudducherry, in his keynote address explained the differences between creativity and innovation, stages of innovation and how to evaluate educational innovations. He discussed with examples how sometimes the regulation and executive or administrators may come on the way to block educational innovations. He emphasized the need of discarding the redundant topics from medical curriculum and why innovations are inevitable.

Dr. William Burdick, Vice President for Education at FAIMER and Co-Director of the FAIMER Institute explained the need of incorporating professionalism in medical curriculum and discussed how to make it and possible challenges and consequences. He discussed it in global context and perspective.

Dr Avinash Supe, President of Academy of Health Professions of India in his keynote mentioned about dynamic medical curriculum, how to design it, need of breaking the barrier of disciplines, importance of interactive T-L sessions, innovations, networking and need of a world-class dynamic , contextual curriculum to inspire and challenge learners of medicine and prepare them for future.

Dr. Bipin Batra, Executive Director of National Board of Examinations mentioned the need of regional cooperation in medical education and showed a road map how can it be done.

The symposiums were interactive and discussed “challenges and issues of improving

quality in health profession in India”, “the role of universities and national bodies in quality assurance in medical education, “Current challenges in accreditation of medical institutes, ‘e-learning”, “Role of faculty development in quality of Medical Education” and progress in dental education in India. The panel discussion on international accreditation of medical education raised the issues in Indian context and fate of students aspiring to go abroad for higher education or for job and what need to be done in this regard.

Eleven work shops were conducted. The workshops were attended by 15-25 participants. The sessions started with welcome address followed by introduction of faculty and participants, a presentation defining the objectives of workshop, group discussions/ brain storming/other activities and structured and open interactions. The session concluded with listing of outcome(s) of the workshop by the faculties and presentation of memento to the faculties.

Many scientific studies were presented in oral and poster sessions. Three best posters and three oral presentations were awarded prizes for their quality work.

How to proceed toward quality medical education was summarized beautifully by Dr. D.K. Srinivasa, through a wisdom mnemonic “BRIC” which says that we need to (B) “Build on existing system/infrastructure”, (R) to be “ Responsive to the changing needs”, (I) be “Inclusive” and (C) “ Co-operative, Competitive and Communicate well.”

The conference ended with vote of thanks.

Summary of Pre-conference workshops

The “7th National Conference on Health Professions Education” held in Maulana Azad Medical College from 18th to 21st November, 2015 arranged eleven workshops i.e., five in the morning between 9.30 am to 1.00 pm and six in the afternoon between 1.30pm to 5.00pm on 18th November, 2015. The workshop titles were decided by organizing committee keeping in view the core theme of the present conference “Quality assurance and accreditation of Medical education”. Each work shop was designed by external and internal experts and executed by internal co-coordinator. The workshops were attended by 15-25 participants. The sessions started with welcome address followed by introduction of faculty and participants, a presentation defining the objectives of workshop, group discussions/ brain storming/other activities and structured and open interactions. The session concluded with listing of outcome(s) of the workshop by the faculties and presentation of memento to the faculties. The outcome(s) of the workshops are as listed below:

| Title of the workshop and the faculties | Outcome(s) |
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| Workshop: Faculty development in professionalism. Faculty members: Dr. Avinash Supe, Dr. Payal Bansal, Dr. Sreenivas | Traditional system can no more be relied to produce good virtuous doctor. Hence formal curriculum in professionalism is required and initiated in India. The curriculum on professionalism, how to teach, assess and ensure its smooth implementation was discussed. Techniques to deal with attitude with changing medical need was emphasized. At the end, the participant were able to: 1. Acquire knowledge of core concepts and elements of |

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| | <p>professionalism i health professions.</p> <p>2. Understood the frameworks to teach and assess professionalism in various context and settings</p> <p>3. Develop a toolkit of skill and strategies to teach and assess professionalism and to deal with issues and challenges related to implementation.</p> |
| <p>Workshop: Stress management. Faculty members: Dr. RL Bijlani, Dr. Arun Jamkar, Dr. Asmita Patil, Dr. Devender Kumar</p> | <p>Mechanism and changes in stress and its coping and methods of stress management should be included in MBBS curriculum. Self awareness and accepting others are cognitive domain of stress management. All new recruits in medical profession should undergo orientation program that should include stress management training and screened for dis-stress and provided help.</p> |
| <p>Workshop: Implementing professionalism module. Faculty members: Dr. Himanshu Pandya, Dr. Praveen Singhl, Dr. . MK Daga, Dr. Sanjay Pandit.</p> | <p>The participants understood the definition and components of professionalism and learned the need teaching professionalism to medical students, various model of learning professionalism, how to assess it and about recommendations of National consultation on Professionalism in Health Education and about ATCOM module and its implementation.</p> |
| <p>Workshop: Quality assurance in medical education. Faculty members: Dr. Sucheta Dandekar, Dr. Nita Khurana, Dr. Kirti Singh</p> | <p>The workshop ended with following recommendations:</p> <ol style="list-style-type: none"> 1. Quality enhancement cell is mandatory in medical colleges. 2. Training of inspectors/ acreditors is mandatory. 3. To Create awareness about the need of making medical education responsive to changing health care needs, a day should be designated as “Medical Education Day”. 4. Indian standard for medical education should be formulated in global context. |
| <p>Workshop: Developing a skill center: sharing experience. Faculty members: Dr. Pawanindra Lal, Dr. Rakesh Kumar, Dr. Ravi Maher</p> | <p>The participants were shown the skill lab of MAMC and described how it was developed. Skill training on mannequin from cardiopulmonary resuscitation to many complex skills were demonstrated.</p> |
| <p>Workshop: Competency-based health professions education. Faculty members: Dr. Himanshu Pandya, Dr. Praveen Singh, Dr. Uma Tekur, Dr. Dinesh Kumar</p> | <p>Participants were given the background knowledge of MCI vision 2015 & the proposed revisions in GMR. Participants were also explained in detail the terms- Goals, Roles and Competencies and their position in proposed GMR. They were oriented to Principles of competency based learning, Progression of learning & levels of competency with examples, Components of proposed competency table from MCI. Methods to select TLM to match competencies and objectives in different domains incorporating SPICES model were explained. Difference between</p> |

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| | traditional & competency based curriculum and their integration were highlighted. |
| <p>Workshop: Teaching-learning in clinical setting.</p> <p>Faculty members: Dr. Rita Sood, Dr. Neelam Vasudev, Dr. Aarti Sood Mahajan</p> | <ol style="list-style-type: none"> 1. Participants realized teaching is a serious job. 2. A structured approach, micro skills are important. 3. Demonstrations are important. 4. They felt theory should be less in MBBS curriculum than its is at present 5. They learnt the techniques of getting commitment, positive feedback, patient based learning and challenges in its implementation. |
| <p>Workshop: Planning and executing research in health professions education.</p> <p>Faculty members: Dr. Thomus Checko, Dr. Amol Dongre, Dr. Jugal Kishore, Dr. Devendra Mishra</p> | <p>Pre-workshop reading material was disseminated. The relevant AMEE guide (No. 56) was also suggested as a resource. This was followed by the session objectives:</p> <ul style="list-style-type: none"> • State the importance, focus and distinguishing features of Education Research • State the steps involved in planning and implementing educational research in their workplace • Identify opportunities in their workplace to carry out research in Health Professional education • Reflect on what steps they would take to ensure they are successful in carrying out educational research that is <u>publishable</u> <p>Subsequent sessions sequentially addressed: Why educational research, differences between educational and clinical research, Research with evaluation, research Hierarchy and training evaluation, STEPS in educational research, types of research questions, approached to educational research, identification of study designs to match purpose, logic model for program planning, Kirkpatrick's levels of outcomes, Scholarship in Medical Education, etc with quite a few group activities in-between.</p> |
| <p>Workshop: Effective communication and interpersonal skills..</p> <p>Faculty members: Dr. BV Adkoli, Dr. Santosh Salagre, Dr. Poonam Loomba</p> | <p>Communication and interpersonal skills are core components in health profession. At the end, the participants were able to:</p> <ol style="list-style-type: none"> 1. Identify the general principles of effective communication 2. Know how to apply the principles in patient-doctor encounter 3. Understood the implications for improving their |

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| | <p>communication skills and interpersonal relationship</p> <p>4. Understood how to introduce these skills in their local settings</p> |
| <p>Workshop: E learning.</p> <p>Faculty members: Dr. Supten Sarbadhikari, Dr. Devender Kumar, Dr. Ravi Meher</p> | <p>E-learning and its components were defined. Limitation of conventional T-L methods and how e-learning can overcome those was discussed. Skill and expertise required for developing e-learning module were explained and importance of medical subject expert in making e-module was emphasized. Limitation of it should be kept in mind. The participants were sensitized to e-learning and their fear in about e-learning was removed. It was felt more and more e-learning module suitable for indian students should be developed, evaluated and incorporated in medical curriculum.</p> |