

Faculty perception of MCI CISP II workshop in a budding college of West Bengal

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ABSTRACT

Background: The present study was conducted to assess the effectiveness and impact of faculty development programmes (FDP) for medical teachers. **Methods:** 25 faculty members (at the level of Professor, associate professor and assistant professor) of Shri Ramkrishna Institute of Medical Science and Sanaka Hospitals underwent the CISP II workshop, one type of FDP. **Results:** There was significant improvement in knowledge and awareness among the faculty members through faculty development programmes. **Conclusion:** FDPs improved the academic performance of faculty with resultant enrichment of learners' knowledge and skills.

Keywords: Knowledge, skills, faculty.

INTRODUCTION

Faculty Development Programmes (FDPs) are an important aspect of medical education and in efficient delivery of medical curriculum. Over the last decade, there have been major changes in the context in which FDPs were delivered around the globe and in South East Asia.^[1] FDPs are central to delivering medical education that is responsive to changes in the health care system, evolving social expectations of the patients and the shift in medical learning to workplace-based approaches. With shortage of health human resources and the increased demand for medical education, regulatory medical councils in the South East Asia region prescribe FDPs to enhance the quality of medical education.^[2] However, for many newly established medical colleges, FDPs are a means to induct faculty members into continuing professional development and increase their capacity to get involved in leadership and management in the university, hospital and the community; and in research and scholarship.^[3]

The professional development and academic stature of an institution's faculty members are connected to its educational vivacity. This can be materialized by a dynamic and energetic FDP that has been shown to lead to enhancement of faculty's skills in all the five desired domains, i.e., teaching, assessment,

curriculum support, organizational leadership and mentoring.^[4] Faculty development endorses the educational improvements and strategies that are dignitary and are executed in a professional manner. Professional organizations and experts have recommended FDPs for greater awareness and attainment of knowledge in teaching and learning.^[5] The new competency based curriculum, which has been implemented from 2019*, is very challenging and requires faculty members to be trained accordingly, for proper implementation of the curriculum. CISP II, Curriculum implementation support programme for phase II is one such training programme. The present study was conducted to assess faculty member's perception regarding CISP II workshop and its effectiveness and impact on a faculty member.

MATERIALS & METHODS

The present study was conducted among 25 faculty of Shri Ramkrishna Institute of Medical Science and Sanaka Hospitals held from 28-29th of September 2020. All enrolled subjects were made aware of the study and their consent was obtained. Ethical clearance was obtained before starting the study.

Data such as name, age, gender etc. was recorded. All faculty members underwent the FDP programmes. The study questionnaire consisted of pretest and post test on the various topics of CISP II workshop. Details of the topics are given in the table no 3. The idea was to assess the knowledge of faculty member and what importance he/ she gives to the particular topic. From the pretest and post test scores, the importance of faculty development programs was highlighted.

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RESULTS

[Table 1] shows that there were professors 02, associate professors 05, assistant professors 18 and tutors/SR 00.

Table 1: Designation wise distribution

	Prof.	Additional Prof	Associate Prof.	Assistant Prof.	Tutor/SR
Number	02	00	05	18	00
Percentage	8	00	20	72	

[Table 2] shows that 6 subjects were from pre-clinical sciences, 6 from para-clinical sciences and 13 from clinical sciences.

Table 2: Department wise distribution

	Pre-clinical sciences	Para-clinical sciences	Clinical sciences	Tutor/SR
Number	06	06	13	00
Percentage	24	24	52	

Table 3: Mean scores on the topics of CISP II

Topic	Item	Mean pre-score	Mean post-score
Competency based medical education (CBME)	Knowledge	2	4.63
	Importance	1.59	4.65
IMG: Goals, roles & Competencies	Knowledge	2.11	4.79
	Importance	2.06	4.75
Deriving objectives from competencies	Knowledge	1.95	4.63
	Importance	1.59	4.47
Linking competency objectives to Teaching Learning Methods (TLM)	Knowledge	1.94	4.72
	Importance	1.71	4.65
Graduate Medical Education Regulations (GMER) 2019	Knowledge	2.26	4.84
	Importance	1.71	4.82
Electives	Knowledge	1.95	4.42
	Importance	1.59	4.35
Foundation Course	Knowledge	1.95	4.74
	Importance	1.76	4.59
Early Clinical Exposure	Knowledge	2.37	4.79
	Importance	2.12	4.76
AETCOM module	Knowledge	2	4.53
	Importance	1.76	4.41
Student Doctor Method of -Clinical Teaching	Knowledge	2.58	4.89
	Importance	2	4.71
Alignment and Integration	Knowledge	2.32	4.63
	Importance	2.06	4.65
Skills training	Knowledge	2.37	4.74
	Importance	2.06	4.59
Assessment in CBME	Knowledge	1.89	4.58
	Importance	1.53	4.59
Aligning assessment to competency objectives & TLM	Knowledge	1.89	4.63
	Importance	1.59	4.65
Curricular governance	Knowledge	1.95	4.63
	Importance	1.53	4.47

[Table 3] shows that competency based medical education (CBME) showed knowledge score before programme 2 and post score was 4.63 and importance score was 1.59 and 4.65 before and after programme. IMG: Goals, roles & competencies pre knowledge score was 2.11 and post score was 4.79, importance score was 2.06 and 4.75 before and after programme. Deriving objectives from competencies showed knowledge score of 1.95 and 4.63 and importance score of 1.59 and 4.47 before and after programme. Linking competency objectives to teaching learning methods (TLM) knowledge score found to be 1.94 and 4.72, importance score was 1.71 and 4.65 before and after programme. Graduate medical education regulations (GMER) 2019 knowledge

score was 2.26 and 4.84 and importance score was 1.71 and 4.82 before and after programme. Electives knowledge score was 1.95 and 4.42 and importance score was 1.59 and 4.35 before and after programme. Foundation course knowledge score was 1.95 and 4.74 and importance score found to be 1.76 and 4.59 before and after programme.

Early clinical exposure pre knowledge score was 2.37 and post score was 4.79 and pre importance score was 2.12 and post score was 4.76. AETCOM module pre knowledge score was 2 and post score was 4.53 and pre- importance score was 1.76 and post score was 4.41. Student doctor method of clinical teaching pre- knowledge score was 2.58 and post score was 4.89 and pre- importance score

was 2 and post score was 4.71. Alignment and integration pre knowledge score was 2.32 and post score was 4.63 and pre importance score was 2.06 and post score was 4.65. Skills training pre-knowledge score was 2.37 and post score was 4.74 and pre- importance score was 2.06 and post score was 4.59. Assessment in CBME pre-knowledge and post score was 1.89 and 4.58 respectively and pre- importance score was 1.53 and post score was 4.59. Aligning assessment to competency objectives & TLM pre knowledge score was 1.89 and post score was 4.63 and pre importance and post score was 1.59 and 4.65 respectively. Curricular governance pre knowledge score was 1.95 and post score was 4.63 and pre- importance score was 1.53 and post score was 4.47. The difference found to be significant ($P < 0.05$).

DISCUSSION

Faculty vitality is the main ingredient to enhance professional education and competence.^[6] Enriching the faculty vitality in key domains of teaching, assessing, research, professionalism, and administration is perceived to improve educational environment significantly and enhances the academic performance of learners.^[7] Faculty development program (FDP) has been considered as a stand-alone educational pedagogy in fostering knowledge and professional skills of faculty. However, few studies have provided objective reports about the impact of such programs in a healthcare system.^[8] The present study was conducted to assess faculty development programmes for medical teacher effectiveness and impact.

In present study, there were 2 professors, 5 associate professors and 18 assistant professors. Bilal et al,^[9] included 37 studies and explored the impact of FDPs on medical and allied health faculty's professional development. This meta-analysis reported a mean effect size of 0.73 that reflects a significant and positive impact of FDPs in enhancing faculty's knowledge and professional competence using the random effects model and forest plot.

We found that competency based medical education (CBME) showed knowledge score before programme 2 and post score was 4.63 and importance score was 1.59 and 4.65 before and after programme. IMG: Goals, roles & competencies pre knowledge score was 2.11 and post score was 4.79, importance score was 2.06 and 4.75 before and after programme. Deriving objectives from competencies showed knowledge score of 1.95 and 4.63 and importance score of 1.59 and 4.47 before and after programme. Linking competency objectives to teaching learning methods (TLM) knowledge score found to be 1.94 and 4.72, importance score was 1.71 and 4.65

before and after programme. Tenzin et al,^[10] conducted a study in which 18 participants were given a structured FDP designed by the University. The FGD assessed teacher self-efficacy and competency using standard tools before and after the FDP. Thematic analysis of the FGD explored the impact of FDPs in the delivery of postgraduate residency programmes. There was significant increase in the teacher self-efficacy and competency scores. There were significant improvements in self-efficacy in the domain of the teaching relevant subject contents and developing creative ways to cope with system constraints. In teaching-learning assessments, there was a significant appreciation of the effectiveness of lectures and tutorials and the use of essay questions. The FGD demonstrated the acceptance of FDPs and its importance in quality improvement of postgraduate medical education, professional development of teachers and improvement of their communication skills. The teachers have now migrated from the conventional methods of teaching to workplace-based teaching and assessment. The FDPs also resulted in review and revision of postgraduate medical curriculum soon after the first batch graduated in 2018. Lack of adequate support from relevant stakeholders and lack of a medical education centre in the University were seen as major challenges.

We found that assessment in CBME pre-knowledge and post score was 1.89 and 4.58 respectively and pre- importance score was 1.53 and post score was 4.59. Aligning assessment to competency objectives & TLM pre knowledge score was 1.89 and post score was 4.63 and pre importance and post score was 1.59 and 4.65 respectively. Curricular governance pre knowledge score was 1.95 and post score was 4.63 and pre- importance score was 1.53 and post score was 4.47. In a new medical college like Shri Ramkrishna Institute of Medical Sciences and Sanaka Hospitals, these programmes should be regularly and frequently conducted as suggested by the attending faculty members.

The shortcoming of the study is small sample size.

CONCLUSION

Authors found that FDPs improved the academic performance of faculty with resultant enrichment of learners' knowledge and skills. The new competency based curriculum is very demanding and such programmes are definitely beneficial for the faculty members.

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