

PERCEPTIONS OF MEDICAL INTERNS REGARDING FACULTY SUPERVISION DURING FAMILY MEDICINE COURSE, CLINICAL SKILLS TEACHING PROGRAM

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ABSTRACT

Background: Objective: To examine the effects of informal communication and interaction between medical interns and faculty members during preparation and delivery of Near Peer Assisted Teaching for clinical skills learning in the Family Medicine Course at Umm Al-Qura University's College of Medicine (UQUMED). **Methods:** A web-based questionnaire was distributed to a purposive sample of 16 interns who participated in the Clinical Skill Program

(CSP) for family medicine course. **Result:** 13 out of the 16 responded to the questionnaire, nine thematic areas were identified. **Conclusion:** Overall results showed that interns were very satisfied with the experience, and the supervisory relationship changed overtime based on the informal communication of the mentorship. The experience gave the interns the confidence to overcome the hierarchal cultural barriers which will ultimately open a channel for communication involving career, life counseling as well as general advice.

KEYWORDS: Perception, faculty supervision, medical interns.

INTRODUCTION

A teacher is a person who carries social, psychological, and an educational identity that can be transferred to others.^[1] Medical teachers teach students about the importance of patient centeredness and patient education, along with this, many universities have now changed the teaching approach to a student centred approach.^[2] Students come with previous experience; therefore, it is worthwhile to use the experience to build the cognitive learning which fosters knowledge formation, translation and usage.^{[3][4]} The student-teacher relationship is a main issue in order to nurture the learning process, but it has not been studied thoroughly in the

context of higher education, although it is an important aspect in the hidden curriculum, which enhances student engagement and the motivation to learn. A positive student- teacher relationship plays a major role in the process of learning, helping to change the hidden curriculum perception.^[5]

In medical school the final year is referred to as the internship year, where medical interns must complete a 12-month rotation between major specialities, this time allows them to achieve certain competencies, plan and apply to residency programs in order to secure their future careers.^[6]

Teaching is an important skill for a physician, because they are required to educate their patients regarding their ailments and management plan.^[7] Medical professionals are required to be competent in teaching in order to disseminate knowledge and learning to others to enhance their ability to transfer knowledge and skills to senior and junior colleagues as well as patients.^[8] Medical universities have acknowledged the need to develop teaching skills in the students, one method which can help achieve this competency is to require students to take on the role of teaching during the medical school year, which can enhance the learning process, whereby instilling the notion that “the best way to learn is to teach”.^[9] The term peer-assisted teaching (PAT) means that students in the same academic level teach one another, whereas the term near-peer-assisted learning (NPAL) relates to “a senior student [who is] a level or more above their peer”.^{[7] [9]} Many benefits can be acquired for both the learner and the peer teacher, such as, communication skills, teaching skills, negotiation skills, among others.^[10] Programs such as NPAL and PAT have helped facilitate clinical skills teaching programs which have allowed medical interns and/or senior medical students to benefit from the overall program. It can also assist in overcoming the deficiency in the number of faculty members, moreover, it aims to provide an opportunity for the student to gain insight into the skills required to be an effective teacher.^[12] Given the opportunity, medical interns are often enthusiastic when it comes to teaching their junior colleagues because it creates in them a sense of leadership and responsibility, however the extra responsibility may cause, some to become overwhelmed with the major roles that they will be required to perform in their future career.^[13] The literature has not clearly investigated one of the advantages which are gained from these types of teaching programs that is the benefit of having direct informal communication between the faculty member and the peer tutor. The strength and the success of the NPAL program relies on previous planning. Another

important benefit of a student-teacher relationship is the bond that is created when they are working together, in effect they can be referred to as co-workers.

The term practice socialization is "the process by which residents, students, faculty and other health professionals acquire the values and attitudes, the interest, skills, and knowledge, i.e. the culture of the groups to which they are, or seek to become, a member" where the interns can gain skills from the working environment.^[14]

Other benefits can be the breakdown of the hierarchical differences between the intern and the teacher, which can allow for a more flexible social congruence, permitting interns to learn more from the faculty member in informal ways that could sometimes help to facilitate knowledge translation, learning skills or gaining attitudes that could be part of the hidden curriculum transferred to the medical interns or students.^[15] Moreover, it can be an opportunity for them to investigate or find out about ways to plan for their future careers within the medical profession.^[13]

UQUMED school is a 6-year program similar to most medical colleges in Saudi Arabia. At the start of the academic year UQUMED interns are assigned to the internship teaching program to assist in the facilitation of teaching in the clinical skills program for the junior academic year (which are years 2 to 6), the intern is given a choice as to when they would like to join the program. In this study the investigator selected interns who elected to participate in the family medicine program's clinical skills session for 6th year medical students. The interns worked under the supervision of academic professors from the department to organize and facilitate teaching during the clinical skills days, which were 12 days during the 7-week period of the course. The peer tutors work on preparing for this task for about 5 months prior to the start of the course. They were creative in how they designed the teaching of the clinical skills needed for family medicine and invented ideas to go along with the required tasks. Supervisors were available for the interns to come back to during the preparation period, they assisted them by broadening their minds, providing advice, and in general being there to solve any obstacles they might face.

The plan for this study is to find their perceptions regarding communication with the supervisor while answering the following questions: How did that relationship develop? What were the effects of the direct communication on their learning experience and what were the skills gained during this experience. The study was mainly descriptive due to the

limited availability of qualitative studies in our area describing the student perceptions in the field of medical education.

METHODOLOGY

This is a qualitative study, investigated the medical interns' perception of direct communication with faculty member during their work as (NPTA) through a mini-structured web-based questionnaire.

The purpose of this study was to examine the effect of the informal communication and interaction between the medical interns and faculty members based on the interns' perceptions concerning the interaction during the preparation and delivery of the family medicine course for the 6th year undergraduate medical school (UQUMED) students.

The number of interns participated during the clinical skill program preparation was 16, communication was mainly but not limited to 3 interns, who took the lead and were in direct contact with the main supervisors throughout the entire preparation and delivery period. However, the supervisors also had an open-door policy for the whole team.

The web-based questionnaires were distributed to the participants at the end of the family medicine course. Participants were asked to answer the questionnaire and were made aware that there would be no consequences if they chose not to.

The sample technique was a purposive sample of 16 interns who participated in the course. The data was analyzed using thematic analysis. We followed UQUMED's ethical consideration guidelines and obtained required approval to conduct the research.

RESULT

Out of the 16 interns 13 responses were submitted for analysis, a total of nine thematic areas were identify.

1- Internship teaching program expectations

Academic improvement gained communication skills, a routine duty to receive graduation certificate, hard time to fulfil the needs of the course.

Examples

"My expectation was that it is going to be a rough time to fulfill the goals of the course and I might had a hard time with our supervisor in case we didn't achieve what is necessary, after finishing the course: - Apparently, It was really a tough time but thank god we as a team fulfilled most of the goals. - Supervisors were so nice, always with us whenever we need them. My expectation about them changed for best"

"I expected to be had much improvement then last year and it met my expectations"

"I was looking for improve my academic skills regarding curriculum development and delivery"

2- Co-worker interactions

Many students had positive interactions between co-workers, they had good leadership, cooperative teamwork, and mutual respect and appreciation.

"Very positive interaction, I believe that if any negativity was in there, it probably was because of me"

"All the coworkers were interested, cooperatives and active"

"It was good specially with the presence of the leaders"

3- Faculty interactions

Interactions were split evenly ranging from none to daily, interactions were mainly through the group leader.

"The communication daily bases with the course supervisor (coordinator) and interns leader"

"Few times (2-3 times maximum)"

"We met with our supervisor before the start of the course to prepare the materials. Then we had WhatsApp group. The main communication with supervisor was through the leaders"

4- Faculty discussions

Task related issues, life experience and felt responsible as a teacher.

"Everyday logistics, Decisions and problem solving".

"The topics, materials and the mood of delivery as well as the regulation of each week session".

"Work, life, advice, experience I really enjoyed and learned a lot to help me in future".

5- Change of relationship

All relationships improved over time, hierarchy and walls/boundaries were reduced making it easy to gain learning essentials in all aspects from supervisors, without restrictions, and earning trust, while working together as real colleagues.

"Supervisor meaning course coordinator, at the beginning I had no idea who she was, because I thought the previous coordinator was still in place, and to be honest I am always anxious around new people, over time I gained her trust and she gained my admiration, in her own way she used to teach me by listening to me, I could go on and on this part until it becomes a book, but in short, my relationship with my supervisor started from her being my manager to her being a personal mentor and a statue of admiration"

"Become better with time from first time it changed a lot, we trust each other, and felt free to talk"

"It started as a formal supervisor student relationship, and ended as a mentorship".

6- Supervisor gender

Gender differences did not affect interactions

"At the beginning, it was a huge barrier, at the end it wasn't as much. But I still know my limits".

"It didn't make a difference"

"There was no problem with the gender variation".

7- Support

Felt supported by mentors along with others involved in the program

"Extraordinarily. exponentially, and significantly"

"One word = Magnificent"

"They fulfil that more than expected"

"100% "

8- Skills

Communication skills, negotiation skills, public speaking, problem solving, social connection, communications and leadership.

"A lot, how to be confident How to take a good decision How to work with your team in a different situations, when to become firm, how to know my life goals How to deal with someone older in a relax way, I improved my skills in these 9 months working in this project and I'm very happy from what I gained and I'm sure"

"It's improved my communication skills with junior and enhance my ability to delivering information. All this will help me in my academic life"

"Leadership skills, organization skills, dealing with stress and responsibilities".

9- Experiences with co-supervisor

The interaction with supervisors were positive and exceptional, learned from their experiences, advice was provided based on respect and trust.

"The way she treated me with great respect and trust was something I'll never forget. I'm someone who observes attentively, seeing her deal with other people was a great lesson"

"The support from the supervisors were amazing"

"Positive: Humble, Smart, Respectful, Negative: I don't know"

Overall satisfaction with the experience

Most interns responses ranged from satisfied to very satisfied

DISCUSSION

The medical students go through the final internship year which is a 12-month clinical rotation done mainly under hospital supervisors without any real role for the faculty professors, apart from the reports received from the hospitals, which indicate that the intern has attended the rotation and achieved certain competencies. The internship year has many challenges and the interns must gain a vast array of competencies within the different specialties in a very limited time. Moreover, the internship year is meant to be a time for personal and professional development, however the medical interns pass through this time feeling physical and psychological stressors.^[16] In fact, teacher-student relationships have not been investigated thoroughly although teacher empathy with the student has shown an increase in student loyalty and confidence.^[17] The hierarchal relationship between faculty professors and students deterred interns from seeking any kind of support or help with ease. Based on this relationship, interns early in their medical careers appreciate the direct supervision they receive through this year, which supports learning, helps decision-making aimed at career planning.^[18] In this paper we investigated a purposive sample of interns in order to assess their perceptions while working alongside faculty members during the preparation and conduction of the family medicine course's clinical skills learning program. The results revealed how the peer tutors changed their perceptions regarding the program from a feeling of it simply being mandatory routine work to fulfill a graduation requirement into one that has instilled passion for the profession and assisted in improving the quality of

teaching. They described how the positive relationship with the supervisors changed from being a supervisory relationship to a purposive mentorship, which assisted them in exploring more options concerning life and career plans. Along with appropriate mentoring the interns gained a sense of empowerment with their new roles and acquired various skills that boosted their confidence levels, this was a direct result of having exceptional supervisors, who provided them with constructive feedback and supported their educational, psychological and social needs, thus promoting them to make the decision to continue on a path to a successful medical career.^{[19][20]} The results reflected students' descriptions of the shift in the relationship has altered their perceptions about the workplace, how they were able to maximize the benefits without being negatively judged, and how problem-solving techniques were implemented with indirect supervisory supervision. Such informal relationships with interns can alter any predetermined or false notions they might have about their supervisors, whereby correcting some false ideas, attitudes or negative perceptions gained from previous experiences upon working with their professors, as well as the enhancement of learning from a role model^{[14][21][18]} The supervisory role was in the form of guiding, teaching, coaching, and problem solving. The roles can be any of the forms found under mentoring, which allows the supervisor to shape a peaceful learning environment within different contexts, thus creating respect and trust where interns can be perceived as future- junior co-workers, which in the long run will increase loyalty and a commitment to achieve the goals of the team.

In conclusion, the role of faculty members is not limited to teaching academic subjects, it can extend beyond conventional teaching with such programs like peer assisted teaching or near peer assisted teaching. This can create an environment for informal faculty- student relationships that can be beneficial to medical students, breaking the hierarchy, creating a learning environment where students feel like they belong and reaping the benefits of having first hand work experience directly from their professors. Upon the completion of the program, the intern leaves with a sense of empowerment, support, and with the provision of valuable counseling, which can set them on a path to effectively plan for their professional careers, which is the overall aim of this program.

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