

Title: Strategic process for establishing one of the first offices of medical education in Nigeria

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Introduction and Identification of Need: The education of doctors in the 21st century is undergoing significant modifications, in order to serve society better. This has led to centralization of curriculum in Offices of Medical Education (OME) in developed countries to provide support to the curriculum and to the medical teachers, in the task of producing efficient caring physicians. However, there are very few OME's in Nigeria. The College of Medicine, University of Nigeria Enugu, a premier medical school in the country, sought to establish an OME to advance medical education and address deteriorating student performance in the MBBS examinations. This paper describes the strategic process through which an OME was officially established in the college.

Methodology: Several strategies were used to obtain concrete data to validate the need and to increase enthusiasm and support for establishing an OME. These included: (1) search of the literature on OME in the USA, Europe and Africa; (2) survey of medical schools in Nigeria conducted by telephone interviews, personal interviews and email questionnaire; (3) needs assessment of the faculty; (4) eighteen meetings with the provost, dean, faculty board, heads of departments, curriculum committee, and student representatives to raise awareness of roles of an OME and solicit support for the project; and (5) four workshops for faculty members featuring among other resource persons, an international medical education expert on sabbatical leave.

Results: There were 26 accredited medical schools in Nigeria at the time of the study. Of the 14 respondents, only 1 had a designated OME. Some roles of an OME were reported to be performed in various places: medical illustration units (86% of respondents), dean's office (43%), curriculum committee (28%), and one examination office.

The four faculty workshops and meetings raised awareness and interest in an OME. Over 40% of the faculty attended at least one workshop. A subsequent survey of the 120 faculty (44% response rate) indicated an overwhelming support for compulsory skills workshops for newly engaged faculty (100%), support for medical education research (93%), and regular faculty development workshops (83%).

A proposal document was submitted to the provost, following which the administration designated an office space for the new OME and provided basic equipment. The administration also named four faculty to volunteer time totaling 0.5 full time effort to work on OME activities. Statutory backing and additional budget for the office is being pursued with determination by the provost

Discussion: The project demonstrated that through a strategy of engagement of major stakeholders, all came on board and gave their full support to the establishment of an OME in the college. Sustaining the new OME will be a critical issue. Initial activities will focus on functions agreed upon by faculty as very important, e.g., workshops for newly engaged faculty and support for medical education research. The future of this office is vitally dependent upon alignment between the services provided by the OME and the functions required by the college.

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