

Title: Appreciating the need of a faculty development course

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What problem was addressed: The Faculty of Medicine, University of Ruhuna has been trying to change over from a traditional discipline based curriculum towards a system based modular curriculum for last 16 years. All attempts at major changes met with resistance from the staff which is a common reaction to change. In addition to resistance from staff members, lack of clear vision and inaccurate assessment of situational factors contributed to the lack of progress. Lately to overcome this problem a different ‘bottom to top’ approach was adopted. This approach was adopted with the intention to “build the climate” for change and to create a “need for change” within the Faculty. This approach was better accepted and was helpful to make a limited integration in the medical course, but it was difficult to sustain the new changes introduced into the curriculum.

A need of a Faculty development Course (FDC) was identified as the priority as it will create a conducive environment for change. A properly designed FDC will make faculty members to take the initiative to contribute to the development of the medical curriculum.

What was tried: The first workshop of the FDC was organized to make the Faculty aware of the need of a change to match the requirement of SBS. The objective was for them to see that there is a gap between the SBS and the teaching program and to convince the Faculty on the need of a FDC to bridge the gap.

The Faculty was motivated to participate through statutory bodies, personal communication and by discussing in focused groups.

37 members representing all the disciplines participated and they worked in four groups. They were asked to reflect on the medical course and to give a grading out of 100 on how they perform as teachers in relation to the various components identified in the SBS which include professionalism, ethics, behavior, knowledge in basic sciences, clinical skills, communication skills, research, management of information, population health.

They were requested to recommend percentage of time allocation for the components identified in the SBS at preclinical, para-clinical and clinical years.

Results: The grading were consistently high for knowledge and basic sciences and low for all the other components. They recommended a significant increase in proportion of time allocation professional and behavioral issues, communication and critical thinking should be an important component in the curriculum.

What lessons were learned: The participation of the Faculty could be significantly improved by using appropriate pre-workshop preparation. The group work could be carefully designed for them to appreciate the shortcoming and come to a consensus agreement on the ways of overcoming the shortcomings.

The Faculty appreciated that the course is not well aligned with the SBS. They shared the view that a significant proportion of time should be protected to teach the components in the SBS other than Knowledge and clinical skills.

The Faculty agreed that a FDC is needed to improve the quality of the staff for them to take initiative to change to meet the demand. In the post workshop feedback participants rated the need for initiating FDC as 4.46 in a scale of 5. (SD 0.56)