Title: Competency based structured internship program for enhanced clinical skills in managing common primary eye care disorders

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Context and setting: Internship in India is the last year of the undergraduate training program, wherein the student rotates for a stipulated period of time in various disciplines and is expected to acquire clinical skills to manage common disorders prevalent in the community. The internship program in a majority of the medical schools is unstructured and there is no formal assessment to evaluate the accomplishment of the desired competencies. As per the guidelines of the regulatory body in India, the interns are posted in Ophthalmology for 15 days, during which time they are required to achieve competency in managing primary eye care disorders as they get the license to practice independently after internship.

Why the change was necessary: The burden of blindness is increasing especially in developing countries, and most of it is either preventable or treatable. Early diagnosis, appropriate treatment and timely referral of several potentially blinding disorders at the primary health care level can save a significant proportion of patients from needless blindness. A structured training program will enhance the educational experience provided to interns and ensure improved competency of graduate doctors in management and judicious, timely referral of blinding conditions, which in turn will have a noteworthy impact on the prevalence of avoidable blindness.

What was done: A structured training program for interns posted in Ophthalmology was developed. To evaluate the existing program, feedback was obtained from the batch of interns who had completed their rotation in Ophthalmology in the previous year. A faculty meeting was held to identify the required key competencies, and consensus was obtained regarding the need to initiate a formal assessment system for enhanced training of interns. A faculty development workshop was conducted to train faculty in newer assessment tools like Mini Clinical Examination (Mini CEX). All interns were assessed by Mini CEX and DOPS (Direct Observation of Procedural Skills) towards the end of their rotation. A Questionnaire was used to obtain feedback from the interns and faculty to evaluate the new program.

Evaluation of results and impact: Feedback obtained from the previous batch of interns (n = 41) revealed that a majority of the students felt that their training needs were not fulfilled during their rotation. Moreover, only 26.1% of interns felt confident about diagnosis and 24.4% about management of common primary eye care disorders.

A structured training program for interns posted in Ophthalmology was developed. Thirty interns underwent training according to the new program. Interns’ feedback reflected overwhelming satisfaction with the structured program and self-ratings, for all competencies were significantly higher for the present batch. Scores of Mini CEX met expectations in 93.3% of interns and that of DOPS in 86.7%. A mean score of 7.8 was given by interns and 8.1 by faculty (on a 9 point scale) for their satisfaction with assessment by Mini CEX. Satisfaction with DOPS also showed a similar trend, with a mean of 7.6 for interns and 7.96 for faculty.

All faculty members gave a favourable response to the new program and expressed interest in continuing with it. Although the long term impact of the program has not been evaluated, perceptions of students and faculty reflect the need for a structured internship program and the possibility of extension of this intervention to other departments. This will pave the path for improved service delivery by the fresh graduates at the primary health care level.