Essence of Establishing Fully Equipped Emergency Medicine Department for Medical Professionals: Key Informants Interview

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Abstract

Background: Medical profession is a combination of multi- sectoral and multi-departmental approach. Emergency department is such type of service area which deals with emergent condition of patients by skilled professionals, staffs and necessary equipment. So, it is important to find out the necessity of establishment of fully equipped Emergency Medicine and Causality Department in health professional training institutes.

Methods: This qualitative section representing a larger cross-sectional study that was conducted from July 2022 to June 2023 to identify current status of emergency care among interns and medical students of Bangladesh. This information were obtained by conducting in-depth interviews with 10 emergency physicians of eight medical college hospitals to find out essence of Emergency Medicine and Causality Department.

Results: Most (80%) of the interviewees mentioned that learning Emergency Medicine is very vital for medical students and interns. They also mentioned that due to identity crisis of the Emergency Medicine, creating challenges for medical graduates to trained upon emergent cases. Majorities (70%) of the interviewees clearly defined that medical professionals are continuously losing skills to handle medical emergencies due to improper training facility by proper trainer and staffs. Many (60%) of the interviewees mentioned a hopeless situation that the learners' skills not up to mark to deal emergency cases. It's not only the learner fault, it's also for lacking in our educational policy. Majorities (70%) of the interviewees agreed that if we want to flourish the essence of emergency Medicine care for our learners it is mandatory to establish separate Emergency Medicine Department by skilled trainers, staffs and required equipment.

Conclusion: This study recommended to produce competent medical graduates by fully equipped of separate Emergency Medicine Department.

Keyword: Emergency Medicine Department, Medical Competence, Emergency Physician, Medical learners, Medical professionals.

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Introduction:

Basic knowledge and skills of emergency care for management of emergent cases it is necessary for every physician and needs to be updated by emergency training. For the sake of the society Liaison committee mention that Medical Education should be competency based for management of acutely ill and traumatic patients. Proper assessment and treatment competency should be adopted by every learner for management of life threating conditions.

So for early clinical exposure and integration with basic science and clinical science in undergraduate Education, the role of emergency must be emphasized and focused.1 For patient survival and getting good prognosis of patient an experienced and skilled hand is very much necessary at Emergency department² The time bound quick action and team work decreases patient complications. Through maintaining patient safety, the rehabilitation care by Emergency physician reflecting a good care to patient.3 A good quality of an emergency physician is taking appropriate decision in appropriate time. 4 Team work is very important at Emergency department. To build communication with team member's periodic team training is very essential.⁵ For effective learning curriculum should be integrated and comprehensive undergraduate medical education. integration the educational load for learners will be huge, so motivation of the learners will be lost.6 According to a study in Iran it is observed in a study that due to lack of proper skill the emergency graduates failed to prove themselves in job sector.⁷ So it is very urgent and crucial issue to establish fully Emergency department equipped for getting competent medical graduates.

Methods:

This qualitative section of a cross sectional study conducted from July 2022 to June 2023 as a part of a thesis work for partial fulfillment of Master in Medical Education (MMEd) from Center for Medical Education (CME) under Bangabandhu Sheikh Mujib Medical University (BSMMU). A total 10 Emergency physician of 8 different Medical colleges of Bangladesh were interviewed using a pre-tested in-depth interview schedule having 5 different questions. Convenient sampling was adopted to select the respondents and interviews were conducted face to face with the interviewees on schedule dates and times considering interviewees preference. On average 10 minutes taken to conduct the interviews. All the interviews were conducted by researcher herself and recorded manually with paper-pencil and smart phone recorder. Necessary clarification to the questions were given by the interviewer to the interviewees if they needed. Additional probing question were asked to the interviewees to understand interviewees' comments. For any further clarification of any obscure point that was mentioned by the interviewees were obtained over telephone. Later on the interviewer re- coded the interviews in descriptive text form manually considering the themes of opinions.

Results:

Findings of in-depth interviews with the teachers have been summarized and given below according to the questions and probing questions and response of the teachers.

Question: What is the current situation of Emergency care in medical college hospital in Bangladesh?

Responses: Emergency Department currently now working as a trafficking department in most of the places. In Emergency department patient load and patient turnover is too much but there are less expertise and manpower to handle this situation. Due to patient load in most of the cases patients are transferred to another hospital. In Our country the person whom is transferred the patient to another hospital sometimes it is observed that person has the less expertise to handle the cases. Due to some berries it is challenge to establish fully equipped emergency department for teaching learning. For this reason, the emergency care at medical college hospitals are not up to the mark. Lack of logistic supports, lack of proper working environment, lack of staffs and manpower at emergency, lack of availability of training facility at emergency and most importantly due to lack of supervision our todays and future learners are affected day by day. The vital and crucial lifesaving skills opportunity of a doctor is depriving for our sharp supervision, monitoring.

"Main problem is that there is no definitive format of teaching learning of emergency care now a day at medical college hospital in Bangladesh."

Question: What do you think about training of the intern on emergency care in Bangladesh? Please explain.

Responses: During in-depth interview one of the respondent said that interns' training should be structured, accountable. The training of the trainer should be established, time to time evaluation of training is necessary. Now a days the training of interns according to curriculum are not up to the mark and the training they are getting not organized. Others respondents also told the training time they get are not sufficient and it would be better if intern do their training on emergency at the ending hours of their internship after completing all other department.

"Interns are not taking any organized training in Emergency department."

Question: What do you think about the level of skills acquired by the intern during their training? Please explain.

Responses: During taking interview schedules the teachers of emergency department said that, emergency department is a vital place for medical students and interns, this is the actual place for hands on training, side by side they felt bad for the todays and tomorrow's learners, most of the teacher at emergency agreed that the way of doing training and the approach, behavior, knowledge and skills they present at emergency department not up to the mark and not satisfactory. The interviewees also said that most of the learners do not like emergency department especially female learners and they are afraid in some point they feel less confident and hesitate to manage a case of emergency due to their poor skill, less hands-on training, in some places due to shortage of actual patient logistic.

"Without individual emergency department and proper prioritization, it is not possible to train up and competent our intern."

Question: Elave you seen any lacking of educational policy for proper training of the intern? please explain.

Responses: Most of the interviewees of emergency department shared some information regarding training of intern in emergency department. They told for a medical graduates the emergency knowledge and skills should be up to date whatever they are doing post graduate in different subject or not, but we are very sorry to say that in our country. For teaching and learning the emergency department is not currently functioning well for medical students and they remain out of box all the time. They have failed to taken as its own identity as a separate faculty and subject. In our curriculum the ownership of this department is far away from medical school. For this reason, the emergency post not created and recent graduates and others doctors failed to get interested due to absent departmental post. As a result we have failed to get expertise in various places and medical colleges. So there was direct and indirect impact on training of intern in emergency care due to the lacking of supervision of educational policy makers.

"Due to lacking of uniform teaching staffs, uniform logistics, uniform hospital beds we are failed to provide emergency care related teaching and learning."

Question: Please explain your valuable comments / suggestions for overcoming lacking

Responses: Some consultant of emergency departments had shared some suggestions to overcome this situation.

They told it would not possible to overcome this situation overnight, but if we want to make it successful we should first focus on curriculum structure, arrange for separate established department, duration of emergency placement should be revised, availability of logistics, manpower, staff supports, some most of the respondent said that it would be better if we arrange workshop for students, interns, teachers, doctors, nurse on ACLS, BLS, ATLS during the academic year of medical profession. According to opinion of emergency physician the accountability and responsibility should be focused in every sector of medical profession.

Discussion:

Opinions of Key informants obtained by in-depth interview

An in-depth interview was conducted among 10 members of different institutions. Out of the 10 members. There were 3 professors, 2 Associate professors, 1 Assistant Professor, 1 registrar and 3 Medical Officers. Answering the question what are the current situation of Emergency care in Medical college hospital in Bangladesh?" Almost all the respondent agreed that the condition of emergency care in medical college in Bangladesh not up to the mark. Most of them stands the logic behind this scenario that were due to poor logistic, manpower, skilled staffs, and poor training facilities.

To answer question the current situation of Emergency care in medical college hospital in Bangladesh?

Emergency Department now a day now working as a trafficking department in most of the places. In Emergency department patient load and patient turnover is too much but there are less expertise and manpower to handle this situation. Due to patient load in most of the places patient are transferred due to this problem. In Our country the person whom are transferred at emergency they have no training. We have failed to establish a separate department now a day. For this reason, the emergency care at medical college hospital now a day not up to the mark. Lack of logistic support, lack of proper working environment, lack of staff and manpower at emergency, lack of availability of training facility at emergency and most importantly due to lack of supervision our todays and future learners are affected day by day. The vital and crucial lifesaving skills opportunity of a doctor is depriving for our sharp supervision, monitoring. A study was done on trauma and orthopedics training to visualize the training condition in undergraduate student's shows that

significant students reported that trauma and orthopedics training is inadequate and poor.⁸

To answer the questions "What do you think about training of the intern on Emergency care in Bangladesh?" Some of the key informants said that the training on emergency care plays a vital role for as intern doctor to be confident, but now a day the skill performance is somehow missing in most of the learners due to their short duration of placement and interest at emergency department. According to the review of curriculum of Bangladesh, 2022, Bangladesh allocates five hours to the Emergency department, total placement duration is 5weeks, where Medicine department got 2weeks, (Morning and Evening, almost 48hours, surgery got 1 week (Morning and Evening) almost 12 hours and Gynae (Emergency Obstetric care) got 2 weeks almost 48 hours (Bangladesh Medical and Dental Council 2021). The specific allocation for emergency care hours is not mentioned for India (Medical Council of India 2018). Pakistan dedicates 50 hours (0.8% of the total 6000 hours) to emergency care in the MBBS course and most importantly in 5th year Emergency Medicine contact hour is 50(4%) (Pakistan Medical Commission, 2022). Sri Lanka provides an eight-week professional appointment in a Professional Unit for emergency care exposure (Rajarata University of Sri-Lanka 2016). Nepal designates 12 hours for theory and a total of 98 clinical hours in the eighth semester for medical emergency (Nepal Medical Council 2017).9

Answering to a question to "analyze the skill acquired by the intern during their training"

Most of the key informants said that the training what the intern are taking are varying from person to person, medical college to medical college. If they are interested and motivated towards the emergency they will learn better. Some of the learner thought emergency is a place of huge responsibility. So they try to avoid being present at emergency department during their scheduled time. As a result they are missing lots of experiences to learn in dealing with emergent patient. Because emergency means there is no time limit, it may occurs any time, when a good case come it seems there were no learners to observe. For this reason interns hands on skill are poor now a days. According to a study in Iran it is observed in a study that due to lack of proper skill the emergency graduates failed to prove themselves in job sector.⁷

In one of my question "Have you seen any lacking of educational policy for proper training of the interns?"

Most of the informants agreed with the opinion that the main barriers of this problem are the policy makers are not still aware of the importance of Emergency Department with proper prioritizing as its own identity. For this reason structured, oriented, focus training on department not yet established. According to the review of the Indian and Pakistan curriculum they have improved educational policy for training of interns. Like India and Pakistan have started simulation based training and video lecturing for their learners.⁹

"When the respondents are requested to mention their suggestion to overcome the barriers of emergency care" They have shared their thoughts and they believed that the day not far away from us that we will run a structured emergency care within our Curriculum for confident learners but before that we have to establish a department with skilled trainers. The time of placement of the intern should be increased an organized. Because some topics and key points are lifesaving so we have to focus on according to importance. In a study teaching issues of allied subjects of surgery group A (Surgery, Ophthalmology & Otolaryngology) was in better condition than group B (Orthopedists Emergency and Causality)¹⁰.

Conclusion:

Skilled hand is necessary for making skilled professionals. Emergency department is the factory for making skilled professionals.

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