



Original Article

Evaluation of Opinion about the Clinical Refresher Courses Conducted for the Teachers of Undergraduate Medical Institutes in Bangladesh

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Abstract

This descriptive type of cross-sectional study was carried out among the faculty members of different government and non government medical colleges selected by simple random sampling from October 2003 to March 2004 using self-administered structured questionnaires - one for the participants and another for their Heads of the departments to evaluate the opinion about the clinical refresher course conducted for them which was organized by WHO & DGHS at the conference room of DGHS. Sample size was 237. From the participants perspectives study revealed that the contents of the refresher clinical course were adequate, 71 (38.6%) respondents strongly agreed that speakers of the workshop were competent, 11 (6.0%) respondents strongly agreed that supplied handouts were adequate but 52 (28.3%) strongly disagreed about it. 45 (24.5%) respondents strongly agreed that audio-visual aids were used adequately, 21(11.4%) disagreed and 4(2.2%) strongly disagreed about it. 47(25.5%) respondents strongly agreed that the duration of the workshop was adequate, 92(50.0%) also agreed but 29(15.8%) respondents disagreed with it. 84(45.7%) respondents strongly agreed that the environment of the workshop was good and 91 (49.5%) also agreed with it. 177 (96.2%) respondents asserted 'yes'- that attending these workshops benefited them, 178 (96.7%) respondents asserted 'yes - that such workshop is essential for them every year. Perspectives of departmental Heads study also revealed that out of 53 respondents 49(92.5%) agreed that the clinical refresher course conducted for the teachers of their departments has enriched their knowledge about the subject concerned but 4(7.5%) responded negatively. 35 (66.0%) respondents agreed that the conducted clinical refresher course for the teachers of their departments helped to develop their skill and 18(34.0%) respondents told that it did not help to develop skills of the teachers of their departments. Out of 53 respondents 49 (92.5%) mentioned that the clinical refresher course conducted for the teachers of their departments could make an attitudinal change among the teachers in their teaching for using updated knowledge and skill of the subject. 46(86.8%) respondents agreed that the clinical refresher course conducted for their teachers has helped to think about their continuing professional development (CPD) through continuing medical education (CME) but 7(13.2%) respondents replied negatively. It can be concluded that the evaluation of opinion about clinical refresher course conducted for the teachers of different medical institutes in Bangladesh was positive and inspiring.

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Introduction

Continuing medical education may be defined as any and all ways by which health personnel learn after the formal completion of their training. CME - continuing medical education- has become an international discipline. Continuing medical education (CME) may be seen as an essential "effector arm" in complex healthcare systems, whether in developed or developing countries². The purpose of continuing medical education is to facilitate change in clinical practice. CME should be based on the natural processes learners use to change².

In looking to the future and rising to some challenges, it is apparent that continuing medical education must be developed from two ends: needs assessment and outcome evaluation. Its offerings should be rooted in a systematic study of real needs and the identification of priorities, which take account of the perspectives of users and providers of health services not just the perceived or real needs of doctors. Continuing education is not an end in itself but a means. At the other end of the educational process providers of continuing medical education need to be rigorous in their evaluation of the effectiveness of their programs in order to provide convincing answers to the most important questions: do these programs make a difference to patient care and improve health outcomes?³

In the United States, most boards (licensing authorities) issue specialists with time-limited certificates. The need for doctors to get re-certified every few years to retain their "board certified" status has fuelled a multibillion-dollar enterprise. This consists mostly of didactic courses offered to doctors in need of credit hours to meet re-certification requirements. The rationale for time limited certificates is twofold: firstly, to encourage doctors to learn and keep up to date; secondly, to identify those doctors who continue to meet the specialty boards standards- and those who do not. In Europe, participation in CME programs is largely voluntary, but both the European Union of Medical Specialists and the Standing Committee of European Doctors have adopted charters, which

state that doctors have an ethical obligation or duty to undertake further education. The European Union of General Practitioners, "recognizing that moral responsibility alone is insufficient" has suggested that doctors should be given incentives to participate in CME activities⁴. The clinical refresher courses which was conducted for the teachers of different medical institutes for their continuing professional development, to keep them updated with the recent development should be evaluated to find out its strengths and weakness. The findings of this study will help for future planning of such courses. It is expected that a survey of this kind will provide guidelines on further improvement of these clinical refresher courses in the light of the participants' or beneficiaries' opinion by identifying the gaps and lacunae of these clinical refresher courses. The main objective of the study was to evaluate the opinion about the clinical refresher courses conducted for the teachers of different medical colleges in Bangladesh. To attain this main goal specifically ascribed objective were to - *i*) assess the opinion of the clinical refresher courses attended teachers on arrangement of the workshop regarding environment of the workshop session, cooperation of facilitators and duration of the workshop, *ii*) assess opinion of the participated teachers about adequacy of course contents, teaching materials and teaching aids (i.e. handouts, notes, audio-visual aids, etc.) *iii*) assess opinion about the necessity of these clinical refresher courses for the teachers of medical colleges for effective teaching learning, *iv*) collect suggestions for the improvement of the clinical refresher courses to make it more effective and need based.

Material and methods

This was a descriptive type of cross-sectional study carried out among 237 faculty members (184 participants & 53 Heads of the departments) of different government and non government medical institutes from October 2003 to March 2004. Data were collected from the participants using a self administered structured questionnaire after completion of three days refresher course organized by DGHS & WHO at DGHS conference

room for eleven clinical disciplines. Experts and seniors of the concerned subjects were the trainers of the refresher courses. Postgraduate holders of the concerned subjects working as teachers at different levels at different medical colleges of Bangladesh were the participants. Data were also collected by using self administered questionnaire from the Heads of the departments latter on from

which departments the participants attended the clinical refresher courses through simple random sampling. Quality was controlled by pre-testing of the questionnaires out side the field and accordingly those were developed, modified & finally approved. Data were entered and analyzed with SPSS (version 10). Results were tabulated & discussed.

Results (Participants' perspective)

Table 1: Distribution of the respondent as per their opinion regarding the process of the clinical refresher courses:

Category of Responses	Adequate course content	Competent speaker	Adequate Handouts	Adequate audio-visual aids	Adequate duration of workshop	Good workshop environment
	Frequency (%)	Frequency (%)	Frequency (%)	Frequency (%)	Frequency (%)	Frequency (%)
Strongly Agree	49 (26.6)	71(38.6)	11(6)	45(24.5)	47(25.5)	84(45.7)
Agree	92(50.0)	92(50)	34(18.5)	105(57.1)	92(50)	91(49.5)
Undecided	9(4.9)	11(6)	22(12)	9(4.9)	14(7.6)	3(1.6)
Disagree	26(14.1)	7(3.8)	65(35.3)	21(11.4)	29(15.8)	3(1.6)
Strongly Disagree	8(4.3)	3(1.6)	52(28.3)	4(2.2)	2(1.1)	3(1.6)
Total	184(100)	184(100)	184(100)	184(100)	184(100)	184(100)

According to table 1 - out of 184 respondents 49(26.6%) strongly agreed that the contents of the refresher clinical course were adequate, 92 (50.0%) agreed about it, 9(4.9%) were undecided, 26(14.1%) disagreed and 8(4.3%) strongly disagreed. Among 184 respondents 71 (38.6%) strongly agreed that speakers of the workshop were competent, 92 (50.0%) agreed, 11(6.0%) were undecided, 7(3.8%) disagreed about it and 3(1.6%) strongly disagreed. Out of 184 respondents 11 (6.0%) strongly agreed that supplied hand outs were adequate, 34 (18.5%) agreed, 22 (12.0%) were undecided, 65 (35.3%) disagreed and 52 (28.3%) strongly disagreed. Out of 184 respondents 45 (24.5%) strongly agreed that audio-visual aids were used adequately, 105 (57.1%) agreed. 9(4.9%) were undecided, 21(11.4%) disagreed and 4(2.2%) strongly disagreed. Out of 184 respondents 47(25.5%)

strongly agreed that the duration of the workshop was adequate, 92(50.0%) agreed, 14(7.6%) respondents were undecided, 29(15.8%) respondents were disagreed and 2(1.1%) respondents were strongly disagreed. Out of 184 respondents 84(45.7%) strongly agreed that the environment of the workshop was good, 91 (49.5%) were agreed, 3(1.6%) were undecided, 3(1.6%) were disagreed and 3(1.6%) strongly disagreed.

Table 2: Distribution of the respondents as per their opinion regarding the benefit for attending this clinical refresher course:

Attending this clinical refresher course I have achieved advance knowledge	Frequency (%)
Yes	177(96.2)
No	4(2.2)
Undecided	3(1.6)
Total	184(100)

According to table 2 - out of 184 respondents 177 (96.2%) asserted 'yes' - that attending this clinical refresher course they have achieved advance knowledge, 4 (2.2%) responded 'no' to it, 3(1.6%) were undecided.

According to table 3 - out of 184 respondents 178 (96.7%) asserted 'yes' - that they want to attend such clinical refresher course every year, 5 (2.7%) asserted 'no' to it and 1(0.5%) were undecided.

Table 3: Distribution of the respondents as per their opinion regarding the necessity of such clinical refresher course every year:

Do you want to attend such clinical refresher course every year?	Frequency (%)
Yes	178(96.7)
No	5(2.7)
Undecided	1(0.5)
Total	184(100)

Results (Head of the departments' perspectives)

Table 4: Distribution of the respondents as per their opinion whether the clinical refresher course conducted for the teachers of their departments has enriched their knowledge, developed skill & made attitudinal change:

Category of responses	Enriched knowledge	Developed Skill	Made Attitudinal Change
	Frequency (%)	Frequency (%)	Frequency (%)
Yes	49(92.5)	35(66)	49(92.5)
No	4(7.5)	18(34)	4(7.5)
Total	53(100)	53(100)	53(100)

According to table 4 - out of 53 respondents 49(92.5%) agreed that the clinical refresher course conducted for the teachers of their departments has enriched their knowledge about the subject concerned but 4(7.5%) responded negatively. Out of 53 respondents 35 (66.0%) agreed that the conducted clinical refresher course for the teachers of their departments helped to develop their skill and 18(34.0%) respondents told that it did not help to develop skills of the teachers of their departments. Out of 53 respondents 49 (92.5%) mentioned that the clinical refresher course conducted for the teachers of their departments could make an attitudinal change among the teachers in their teaching for using updated knowledge and skill of the subject but 4(7.5%) respondents replied negatively.

According to table 5 - out of 53 respondents 46(86.8%) agreed that the clinical refresher course conducted for their teachers has helped to think about their continuing professional development (CPD) through continuing medical education (CME) but 7(13.2%) respondents replied negatively.

Table 5: Distribution of the respondents as per their opinion whether the clinical refresher course conducted for their teachers has helped to think about their continuing professional development (CPD) through continuing medical education (CME)

Whether the clinical refresher course conducted for their teachers has helped to think about their CPD through CME?	Frequency (%)
Yes	46(86.8)
No	7(13.2)
Total	53(100)

Discussion

When asked about the adequacy of the content of the course, out of 184 respondents 49(26.6%) strongly agreed that the contents of the refresher clinical course were adequate, 92 (50.0%) agreed about it, 9(4.9%) were undecided, 26(14.1%) disagreed and 8(4.3%) strongly disagreed about it. Positive opinion was expressed by most of the

respondents about the contents of this clinical refresher course. Because those contents were selected at a consultative meeting of the focal persons of the concerned involved subjects beforehand. Regarding the opinion on the competency of the speakers respondents were divided among themselves as follows – among 184 respondents 71 (38.6%) strongly agreed that speakers of the workshop were competent, 92 (50.0%) also agreed about it, 11(6.0%) were undecided, 7(3.8%) disagreed about it and 3(1.6%) strongly disagreed about it. Majority of the respondents agreed about the competency of the speakers of this clinical refresher course organized for the teachers of different medical institutes. This is a very climactic result and could be due to lack of training programs on teaching methodology carried out by institutions like Center for Medical Education. Training should make nearly cent percent respondents agree on the competency of the speakers. Commenting on the adequacy of supplied handouts, out of 184 respondents 11 (6.0%) strongly agreed that supplied handouts were adequate, 34 (18.5%) agreed about it, 22 (12.0%) were undecided, 65 (35.3%) disagreed about it and 52 (28.3%) strongly disagreed about it. Negative expression was expressed by most of the respondents about the supply of handouts on different topics for discussion. Few of the speakers provided hard copies of their presentations, many of the speakers could not provide it in time and some of them did not allow distributing as handouts. It is better for such group of learners to have handouts and speakers should always be prepared to supply handouts. Out of 184 respondents 45 (24.5%) strongly agreed that audio-visual aids were used adequately, 105 (57.1%) agreed similarly. 9(4.9%) were undecided, 21(11.4%) disagreed and 4(2.2%) strongly disagreed about it. Most of the respondents expressed their positive expression about the use of proper audio-visual aids in the workshops. This response decides that clinical refresher course will not face the inadequacy of

audio-visual equipment, which makes teaching learning of the course conducive. Out of 184 respondents 47(25.5%) strongly agreed that the duration of the workshop was adequate, 92(50.0%) also agreed with it, 14(7.6%) respondents were undecided, 29(15.8%) respondents disagreed and 2(1.1%) respondents strongly disagreed with it. Around all the respondents thought that duration of the workshops were adequate. It was also difficult to leave the posting or practicing places of the clinical teachers. Time allotted for the course may now serve as an indicator of how long the course should be. Out of 184 respondents 84(45.7%) strongly agreed that the environment of the workshop was good, 91 (49.5%) agreed with it, 3(1.6%) were undecided, 3(1.6%) disagreed with it and 3(1.6%) strongly disagreed. Environment of the workshops were well accepted by most of the respondents which was essential for such training course, without good environment this course might have failed to attain objectives. Responding to the question whether the participants were benefited by the clinical refresher course, out of 184 respondents 177 (96.2%) said 'yes', that attending this workshop benefited themselves, 4 (2.2%) said 'no' about it, 3(1.6%) were undecided. Almost all the respondents told that attending such workshops benefited them professionally through this approach of continuing medical education (CME) for their continuing professional development (CPD). The departmental Heads who observed the participants afterwards also thought that those benefited the participants (vide infra). Responding to the query on the necessity for workshops on clinical refresher courses, out of 184 respondents 178 (96.7%) asserted 'yes' to the necessity of such workshop every year, 5 (2.7%) said 'no' and 1(.5%) were undecided. Nearly all the respondents expressed the necessity of such workshop every year. The departmental Heads also agreed that the participants have been benefited with regards to enrich knowledge, develop skill, and make attitudinal change and feels the requirement (vide infra).

Opinion of the departmental Heads supports the response of the participants of the clinical refresher course. Out of 53 respondents 49(92.5%) agreed that the clinical refresher course conducted for the teachers of their departments has enriched their knowledge about the subject concerned but 4(7.5%) responded negatively. As after consultation with the concerned senior faculty members considering the need of the faculty members of the subject the presented topics of the clinical refresher courses were selected. So it helped a lot to enrich their knowledge as there was opportunity for interactive discussion and question answer session after the presentation and also hand outs were supplied for better and effective discussion.

Regarding the developing of the participants' skill - out of 53 respondents 35 (66.0%) agreed that the conducted clinical refresher course for the teachers of their departments helped to develop their skill; however 18(34.0%) respondents told that it did not help to develop skills of the teachers of their departments. In this clinical refresher course as the topics were presented by the experts showing the techniques of skills through computer via multimedia projector on the large screen which was followed with a fruitful interactive question-answer session about the technique/skill concerned. So it helped a lot to develop their skills. As it was not cent percent live, so some of the participants differ with it that it did not help to develop skills of the teachers. It was also suggested by them that if it would be possible to organize any live situation for their hands on practices it could help them in better way for developing skills. Out of 53 respondents 49 (92.5%) mentioned that the clinical refresher course conducted for the teachers of their departments could make an attitudinal change among the teachers in their teaching for using updated knowledge and skill of the subject but 4(7.5%) respondents replied negatively. In this clinical refresher course the attending faculty members of different medical colleges of the same subject got a great opportunity to exchange their

knowledge, skills, views and ideas among them through fruitful discussion session. So it helped to minimize the gaps among them and developed a team spirit which brought an attitudinal change among them in their teaching for using updated knowledge and skill of the subject. Out of 53 respondents 46(86.8%) agreed that the clinical refresher course conducted for their teachers has helped to think about their continuing professional development (CPD) through continuing medical education (CME) but 7(13.2%) respondents replied negatively. At this clinical refresher course as the attending faculty members of different medical colleges got a great opportunity to exchange ideas and to develop skills about different recent developments of the subject which they could not achieve it during their formal post graduation. So these clinical refresher courses created an insight among them for their continuing professional developments (CPD) through such regular continuing medical education (CME) to keep them updated with the recent developments of the subject.

Conclusion

It can be concluded that the evaluation of opinion about clinical refresher course conducted for the teachers of medical colleges in Bangladesh was positive. Both the views of the participants and the supporting views of the departmental Heads have revealed a very enthusiastic desire for the continuity of continuing medical education through these clinical refresher courses that had been reflected in their responses. Recommendations that could be suggested from the result of the study are: on the basis of some prefixed selection criteria Central Continuing Medical Education Committee (CCMEC) should select participants from all government and non government medical colleges as per their desire. At the very beginning a consultative meeting should be arranged with the focal persons of the concerned subjects to select contents or topics which are need based, most recent and updated. Speakers or resource persons of the clinical

refresher courses can be selected or nominated by Central Continuing Medical Education Committee (CCMEC) beforehand as they get enough time to prepare themselves competently. Duration should be increased up to one week for clinical refresher course of each discipline. WHO with the collaboration of MOH&FW should take initiative to establish online internet facilities at each department of every medical college for effective evidence based practices. Participants should be provided with sufficient relevant handouts. Credit can be fixed up for this clinical refresher course which should be conducted each year for their continuing professional development and which should also help the participants in their promotion, posting, certification, re-certification.

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