

Perception of Faculty of their Role as Medical Facilitator

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ABSTRACT

Introduction: Over the past few decades integrated curricula has been presented in undergraduate medical education with an important point of producing competent doctors. In conventional teaching basic science subjects are taught in separation and no correlation exists between basic and clinical science subjects as well. British Medical School has been criticized within the report “Tomorrow’s Doctors: Suggestions on Undergraduate Medical Education”, for overburdening students with genuine information and recommendations emphasized that medical course ought to promote critical understanding of the core knowledge

Health professions education is highly demanding and complex field. Integrated curriculum and modern instructional strategies demands the role of medical facilitator be revamped. These perceptions can be utilized to plan faculty development workshops to upgrade the mindfulness of the faculty about their educational responsibilities and accomplish their potential.

Objective: To explore faculty perception regarding role of medical facilitator in a private sector medical college

Material and Methods:

Study design: Quantitative cross sectional

Settings: Shahida Islam Medical & Dental College Lodhran

Duration: Six months i.e. July 2020 to December 2020

Data Collection procedure: It was quantitative cross sectional study conducted on a private sector medical college. Pre validated questionnaire was used to measure the perception of faculty members as facilitation of medical undergraduate students.

Results: A total number of 40 faculty members filled the questionnaire. Eight items questionnaire was used after giving consent from faculty members. In this study of 40 participants, 22 were males and 18 were females. Regarding faculty perception of their roles as medical facilitators 95% shown as information provider, 89% as role model, as resource provider and facilitation in and outside the class both 88%, as leader 87%, curriculum developer 86% and researcher as 82%. The data was analyzed using SPSS version 24.

Conclusion: The role of medical facilitator has extensive across the boundaries of information provider in facilitation of medical undergraduate students. The faculty of medical college shown their mindfulness about modern-day medical education and recognized the foremost important part of a medical facilitator to be not as it were an information provider but also an on-job role model and scholastic advisor to undergraduates.

Key words: facilitator, faculty, perception, role model, medical

INTRODUCTION

Over the past few decades integrated curricula has been presented in undergraduate medical education with an important point of producing competent doctors. In conventional teaching basic science subjects are taught in separation and no correlation exists between basic and clinical science subjects as well. British Medical School has been criticized within the report “Tomorrow’s Doctors: Suggestions on Undergraduate Medical Education”, for overburdening students with genuine information and recommendations emphasized that medical course ought to promote critical thinking of the core knowledge¹.

Health professions education is highly demanding and complex field. Integrated curriculum and modern instructional strategies demands the role of medical facilitator be revamped. These perceptions can be utilized to plan faculty development workshops to upgrade the mindfulness of the faculty about their educational responsibilities and accomplish their potential^{2,3}.

Facilitators are the spine of an education framework. They play a vital role within the learning of students and have a critical impact on the conveyance of healthcare through the students they instruct once they are in medical practice. A medical teacher’s commitment to teaching may vary from an occasional address to the normal supervision of clinical sessions, to responsibility as course director or educational programs organizer, and to a full-time education position with a range of educational obligations⁴.

Subsequently, it is basic for the medical instructors to be mindful of the key roles they have to be play and create the skills, states of mind, and practices of a competent facilitator in encouraging student’s learning. This metacognition gives them a better understanding of their cognitive processes. This, coupled with the individual fulfillment of being an effective facilitator, is the motivation to end up better medical facilitator. It is critical to keep in mind that the actual details of any educational programs matter little as compared to the determination of instructors. In case the instructors are good, any framework will work

effectively, and on the off chance that they are detached, even the leading educational modules will fail to produce the specified outcomes. Hence, the enhancement in medical education is largely dependent upon the state of mind of medical instructors toward their instructional practice and the learning of their undergraduates^{5, 6}.

Moreover, within the show educational environment, instructors are anticipated to perform multiple roles that incorporate administrative obligations comprising educational modules and course planning, execution of the plan, and observing the method of instruction. Furthermore, the administration style of the instructor is of extraordinary significance in creating and executing the teaching-learning program. Too, modern scholastic and proficient writing has promoted the thought of reflection in instructing. Reflective practice makes a difference in advancing professional growth and revealing the hidden assumptions, beliefs, and values around instructing⁷.

Medical facilitators may see their roles in an unexpected way, depending on a few variables, such as their claim educational foundation, the educational environment of the Institute, and the level of their training as a medical facilitator. Several studies have been conducted universally to understand the recognitions of instructors about their roles and duties^{8, 9}.

MATERIAL AND METHODS:

It was quantitative cross sectional study conducted on a private sector medical college. Pre validated questionnaire was used to measure the perception of faculty members as facilitation of medical undergraduate students.

RESULTS

A total number of 40 faculty members filled the questionnaire. Eight items questionnaire was used after giving consent from faculty members. In this study of 40 participants, 22 were males and 18 were females. Regarding faculty perception of their roles as medical facilitators 95% shown as information provider, 89% as role model, as resource provider and facilitation in and outside the class both 88%, as leader 87%, curriculum developer 86% and researcher as 82%. The data was analyzed using SPSS version 24.

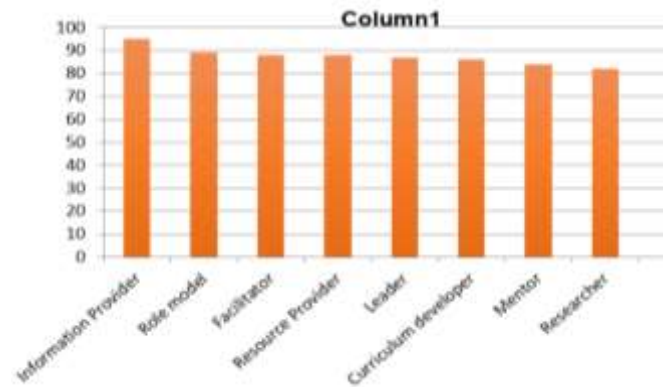
Table 1. Demographic Detail

No.	Parameter	
1	Total faculty members	40
2	Male	22
3	Female	18
4	Mean Age	45

Table 2. Faculty Roles

No	Roles of Facilitators	%age	Rank
1	Information Provider	95	1st
2	Mentor	84	6th
3	Role model	89	2nd
4	Facilitator	88	3rd
5	Leader	87	4th
6	Curriculum developer	86	5th
7	Resource Provider	88	3rd
8	Researcher	82	7th

Fig. Percentage perception of each dimension by faculty members



DISCUSSION

Education within the medical profession requires capable information of persuading the learner and assessing their competence. In expansion, the aptitudes to deal with the competing requests of patient care, investigate, and instruction are equally important. In truth, a educator isn't only a role model who has an impact on each aspect of students' development and on creating their innate potential but is additionally a motivator, guider, and companion¹⁰.

The duty of a medical facilitator is to communicate and interpret the language of medical science into the minds of learners. Besides, the medical teacher of nowadays is additionally dependable to empower and engage the learner to emerge as a competent doctor who is prepared to require on the challenges of the quickly changing world as a health leader. The present study has utilized the same model to evaluate the perceptions of the faculty of a private medical college. In our study, the foremost important part seen was that of an information provider in a clinical setting, taken after by an on-job role show. This is often in accordance with the results of a study done in Thailand where three highly-rated parts were clinical instructor, on-job role model, and lecturer¹¹.

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Studies further concluded that it is most likely due to social reasons or a carry-over impact of the fundamental instruction framework of Asian societies. Numerous developing countries are still utilizing conventional educational module due to a need of infrastructure and assets required to plan and execute modern integrated, student-centered curriculums. Our think about advance demonstrates that parts with medical skill are given more need than with educational ability. These comes about differentiate with studies done by Reuler and Nardone, which emphasized the administrative part, consisting of arranging and controlling the curriculum, and leadership style as the foremost important parts of a instructor within the current educational setting¹².

The restriction of the present study is that it was conducted in one private division medical college, which does not mean it speaks to the perceptions of all medical teachers. Faculty perceptions around their roles may change in numerous educational environments; hence, it is important to conduct a bigger national-level multicentre study to get it faculty perceptions in an assortment of setups. A run of qualitative studies may moreover be required to better understand the in-depth reason for the teacher's perception of their roles. Once recognitions of medical instructors almost their roles are identified, medical institutes can get ready faculty development programs to provide training to all workforce individuals^{13, 14}.

CONCLUSION

An educator is significant to the victory of any institution program. The part of an instructor in the educational process is changing. Instructors must reflect upon their execution so that average teachers can change into great instructors, great instructors into the leading, and the most excellent facilitator can gotten to be rousing. The present study has concluded that the workforce of medical college exhibited their awareness of and recognition with modern-day medical education.

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