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BATTICALOA MEDICAL JOURNAL

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Health-Care Education in Batticaloa; Ten years on

KE Karunakaran

Batticaloa Medical Journal 2016; 7: 3 – 6.

Overview

Modern Medical Education in Sri Lanka has been traced to have begun in the early 19th century, with the inauguration of a Medical School by the American Medical Missionaries headed by Rev. Dr. Samuel F Green (1,2). However, the official documentation of the beginning of Medical education is dated with the establishment of a Medical School in Colombo, in 1870 and is said to be the forerunner in the country (3).

The Faculty of Health-Care Sciences (FHCS) at Eastern University Sri Lanka, was established by a Gazette notification in November 2004 (4). The first set of students to read for a MBBS degree walked in, in June 2006. Thus, FHCS completes 10 years of producing graduates in Human Health Sciences, with 154 graduates in Medicine and 34 graduates in Nursing (5).

It is then, appropriate to look into the past with a view to be in the forefront in taking the Medical Education forward in the 21st century. This becomes essential as University Education is in a phase of transformation which has already begun in the world arena and is also happening in the present decade in Sri Lanka.

At the beginning of the 20th century, widespread reforms in Health professional education started to occur around the world. The Flexner report which focused on Medical Education (6), the Welch Rose report on Public Health Education, and the Goldmark report on Nursing, had a significant impact on these reforms (7) that led to the science-based curriculum. Around the mid-20th century, problem-based instructional innovations began to occur. Accordingly, major curriculum changes have been undertaken in most medical schools in Sri Lanka since 1990 (8).

It was however, reported that glaring gaps and striking inequities had been persisting as noted during the first decade of the present century

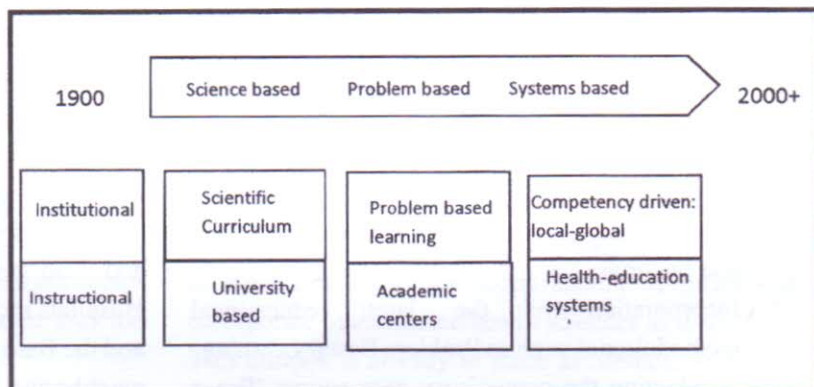
(7). Across the globe there is maldistribution of Healthcare personnel, relative to the population and their health needs (7). A similar situation is found in Sri Lanka as well. It is well evident that Health personnel and facilities are more abundant in the urban areas than in certain rural villages. Therefore, there is a great need incumbent upon us, the ‘producers’ of Health professionals, in moulding them to serve even in the most remote situations.

Health is about people. There is a group of people who are being trained, either professionally or otherwise, to provide health care to all the people (7). Therefore, the need for the tertiary education in health sciences in our Higher Education System has to be streamlined to cater to the needs of the population.

Thus, through a century and over, there have been changes in the higher education of Health Sciences and now, we are on the road heading towards an education based on competencies, breaking the barriers and forming the integration of the health and educational systems.

The illustration given below [reproduced from the Lancet commissions (7) clearly shows the three generations of reforms in the last century. It is also worthwhile noting that, the higher education system in Sri Lanka acknowledges that, producing 21st century graduates requires a shift towards ‘Outcome Based Education’ and ‘Student Centered Learning’ (9).

Three generations of reform (7)



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The formation of the Faculty of Health-Care Sciences at Eastern University Sri Lanka had been a long and planned process. This process allowed the incorporation of the latest developments in the Health Sciences education in the global arena and has not been a copy of any existing program of any of the Medical faculties in Sri Lanka.

The following events could be called the noteworthy steps in the formation of the FHCS:

1. Naming the Provincial Hospital Batticaloa as a Teaching Hospital in 1993. Furthermore, the status was upgraded in 2006 after the establishment of FHCS.
2. Post basic diploma in Nursing was begun in 1998 and continued upto 2002.
3. Formation of a Medical Faculty Committee that has comprised of well recognized academics, Medical Educationists, clinicians etc. since early 1990s.
4. An Interim Faculty Board which has functioned since 2003 until the establishment of the faculty.
5. Appointment of a Development Consultant.

In the formation of the faculty several innovative steps have been taken to be on par with the reforms in the health sciences education. The following are worth mentioning:

1. The name 'Faculty of Health-Care Sciences' is unique.
2. Integration of academic disciplines.
3. Formation of Departments with the norm of administration.
4. Incorporation of the MBBS study disciplines in four such Departments.
5. Formation of a Department for other health sciences courses such as Nursing.
6. Formation of a Department of Medical Education and Research.
7. Identification and formulation of student learning objectives.
8. Design of the Curriculum in the form of Modules and Sessions.
9. Incorporation of the latest educational methodologies such as Problem Based Learning.
10. Conducting the compulsory core course 'Peace Medicine'.

Thereby, a new outlook has been provided to the MBBS study program 'which has happened for the first time' in the history of Health Sciences Education in Sri Lanka and has also paved the way to have common sessions to MBBS & B.Sc Nursing study programs.

Categorization of student learning objectives and formation of the curriculum into modules and sessions also paved the way for the faculty to find the best resource persons in the teaching-learning activities and who were able to deliver the best to the students.

It has been observed that 'the main feature' of the FHCS curriculum plan is the integration achieved through an organ-system approach and problem-based learning. The students learn medical knowledge, effective communication, and professional ethics and behavior via complementary co-modules and generic courses. The evaluation is through continuous modular and terminal assessments, where emphasis is placed on feedback and counselling (10).

The faculty (FHCS) has been commenced with an aim of having the different human health sciences degree programmes under 'one roof'. Thus, apart from the MBBS program, other degree programmes such as Nursing, Pharmacy, Public Health etc. can be conducted. Currently B.Sc in Nursing has been conducted since 2008. Inputs from other departments have been provided as scheduled. Whenever possible, attempts have been made to have sessions common to both MBBS and B.Sc Nursing programmes together with success.

Although on the cards, formats new to Sri Lanka have been incorporated into the academic administrative set up and also into the study programmes of the Faculty of Health-Care Sciences: their implementation was no smooth sailing. The major challenge faced is the lack of infrastructure and in particular the lack of staff. The faculty has been able to overcome this situation by incorporating the facilities and the extended faculty of the Teaching Hospital Batticaloa into its degree programmes and also remarkably the resources in the peripheral Hospitals including the District General Hospital Ampara and the Base Hospital Kalmunai, which are situated in the neighboring Ampara District.

Leading article

Furthermore, the arrangement of modules and sessions enabled the faculty to choose academics from other universities and organization such as the World Health Organization, who were readily willing to assist in conducting the Teaching/ Learning program.

The Consultant Specialists at the Teaching Hospital, Batticaloa, who comprised the extended faculty has been supportive not only in conducting the clinical aspects of the study programme, but also involved in the teaching of Basic Sciences and pathophysiology modules. This arrangement has an added advantage, that clinical inputs and facts of importance too are stressed while delivering the lessons.

Credit for the major successes the FHCS achieved should go to the following:

1. Former Chancellor, Eastern University, Sri Lanka Prof T Varagunam.
He was a well known and respected Medical Educationist, Professor in Medicine at University of Peradeniya and was the live-wire of the Faculty of Health-Care Sciences during its initial period. He introduced new concepts in the structural and curricular design of this faculty, continued to give leadership and a helping hand in engaging the resources with the use of new technology such as video conferencing.
2. The staff recruited in the initial years.
Staff recruited in 2005, 2006 and 2007 should be given credit. During these three years a handful of academic and non academic staff were recruited to function at the Faculty when students began to get enrolled. It was their unprecedented dedication and application that initiated the success of this faculty.
3. Planning of Infrastructure.
Infrastructure planning and development of the FHCS at its initial stage had to be reformulated from an already dismantled infra-structure development plan, which was painstaking. It was on this initial work done by a few staff that formulated a strong template for the infrastructure development at its permanent location and the construction has already commenced.
4. Formulation of credits to the MBBS program.
The task of allocating credits to the modules, instructional, practical and especially clinical components of the study programme was

undertaken by the Department of Medical Education and Research and completed successfully. This was one of the significant achievements with regard to the MBBS degree program. This has been commended by the University Grants Commission also.

5. The graduates.

It is hereby placed on record that the entire batch of students (27 in number) recruited as the first MBBS batch of this faculty, got through the Phase III (Final) MBBS examination in their first sitting itself. Furthermore, the students had to sit the common MCQ paper with which the graduates were ranked by the University Grants Commission to formulate the common merit list. One of our students was ranked 12th and three more students were within the first 40. The performance of the 2nd batch of students too were almost at the level of 1st batch except that, two students had to complete the Phase III (Final) in their 2nd attempt, in the same academic year.

6. The Extended Faculty.

The unprecedented support given by the Consultant Specialists of Teaching Hospital, Batticaloa contributed significantly. The academic staff from other Medical faculties too was much supportive.

The Future

The higher education system of Sri Lanka in the current century is on the track of ensuring the formation of high quality and employable graduates. However, great challenges still exist, in achieving this goal. Thus, our focus should be on forming the correct mindset in the students towards this goal. The academic faculty too should be geared up to transform themselves according to the present trends in higher education.

The future of Health Sciences education depends chiefly on formulating and implementing educational policies appropriate to the present century. Thus, Departments or Disciplines of Medical Education should be strengthened to meet this focus. Its scope should be broadened to incorporate other human health sciences as well.

This outlook is already in place as Medical Faculties are in the process of upgrading their Medical Education units into Departments. The Faculty of Health-Care Sciences of the Eastern University is the forerunner in this regard.

Conclusions

Modern Medical Education is in the third century in Sri Lanka. Transformation of medical education from the form of Apprentice and Teacher centered instructional modes to Student centered, problem based, outcome oriented form is evident. The Faculty of Health-Care Sciences of the Eastern University has recorded its success in this transformation in its history of ten years of functioning, by sustaining its integrated, system based undergraduate degree program in Medicine, with incorporation of problem based learning approaches successfully and conducting the BSc in Nursing almost in a similar fashion. The faculty also records that the future of the undergraduate degree programmes in health sciences lies chiefly on the umbrella purview of the Educational policies formulated and implemented by the Department/ Discipline of Medical Education.

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