

## 21<sup>ST</sup> CENTURY MEDICAL EDUCATION IN UNIVERSITY OF MALAYA

Over one hundred years ago, Sir William Osler, took up the Chair as the Regius Professor of Medicine at Oxford, after distinguished careers as professor in medicine at McGill University in Montreal, the University of Pennsylvania in Philadelphia, and the Johns Hopkins University in Baltimore. He was a superb clinical and a great teacher, and will be remembered for his contributions to medicine, including the establishment of medical residency programmes. He insisted that students learned from seeing and talking to patients, rather than just from dry didactic lectures as was the traditional teaching method of the time. And in referring to continuing medical education, he said, "The hardest conviction to get into the mind of a beginner is that the education upon which he is engaged is not a college course, not a medical course, but a life course, for which the work of a few years under a teacher is but a preparation (1)."

What does this term medical education conjure up? Does it refer to the teaching and learning of medicine and therefore relates to students and the curriculum? Does it refer to the process of teaching and therefore relates to teachers? Perhaps it is both, since teaching and learning go hand in hand.

The undergraduate curriculum is the first stage of medical education (2). It provides a foundation for future learning and practice as a pre-registration house officer and beyond. Graduates who have gone through this process must be aware of, and meet, the principles of professional practice that make clear to the public the standards of practice and care they should expect.

The General Medical Council of UK first published *Tomorrow's Doctors* in 1993 (3), which provided recommendations on undergraduate medical education. In more recent recommendations in 2003 (2), the emphasis moved from gaining knowledge to a learning process that includes the ability to evaluate data as well as develop skills to interact with patients and colleagues. The recommendations provide a framework that UK medical schools use to design detailed curricula and schemes of assessment. They also set out the standards that are used to judge the quality of undergraduate teaching and assessments when accreditation visits are carried out of respective medical schools.

With increasing interest in medical education as a discipline or specialty, many medical schools have established a medical education department (4). Such

departments have various titles. Ones in common use include medical education unit, centre for medical education, centre for educational research, office of research in medical education or centre for educational development. The name of the department or unit suggests its position within the university structure.

The establishment of a department of medical education can also be seen as a response to various pressures, expectations and changes in society, education and medicine (4). These pressures include increased public expectations relating to healthcare, which place increasing demands on health professionals, societal trends towards increased accountability, educational developments that call for increased sophistication on the part of teachers in the health professions, increased scope of and specialisation within medicine that focus attention on what to teach and how to educate doctors, and the need to train more doctors within existing resources.

Medical education in the Faculty of Medicine, University of Malaya, has existed albeit in small pockets, and often as a result of the enthusiasm of individual academic staff. In 2002, the Medical Education Development Unit (MEDU) was first conceived in a working paper, and the final proposal was submitted first to Faculty and then to Senate for discussion and approval in 2005. However, the unit did not take shape until late 2007 when it metamorphosed into the Medical Education & Research Development Unit (MERDU), to incorporate the already existing Health Research & Development Unit (HeRDU).

MERDU has two main arms that cover medical education and medical research development. Some of the scope of work of the unit, under the medical education arm, will include monitoring and development of the curriculum and of assessment (including blueprinting of all examinations, and providing feedback to individual departments on student performance), introducing standard setting, developing eLearning and eTeaching modules, and learning about current trends and innovations in medical education circles from international meetings and to making these more widely known to faculty.

It has long been recognised that faculty development in medical education is crucial for developing and sustaining quality education in medical schools (5,6). MERDU will be responsible for initiating a formal orientation

programme for junior or incoming academic staff on our curriculum and faculty. Teaching the teachers is an important area which needs to be developed, and regular courses will be started to ensure academic staff are equipped with generic teaching skills, and later, to progress to other courses to develop more specific skills such as learning Problem-Based Learning (PBL) tutoring, PBL case writing, writing good examination questions and training to be an Objective Structured Clinical Examination (OSCE) examiner.

The administration of the Clinical Skills Laboratory (CSL) and the PBL tutorial rooms also comes under MERDU. The CSL was first opened in 2000, and has excellent facilities including a wide variety of mannequins and other training equipment for providing a safe environment for students to learn skills and procedures in simulated clinical situations. The PBL tutorial rooms have one-way mirrors and audio-visual equipment, and in addition to being used for PBL tutorials in the first and second years of the undergraduate MBBS programme, are currently used regularly for training workshops for PBL tutor training as well as OSCE examiner training.

The health research development arm of MERDU provides a consultancy service to help academic staff and postgraduate students on research topics and statistical analysis of data. It is also involved in faculty development, providing a wide range of training workshops on various aspects of research methodology and scientific publication. The editorial boards for the Asia Pacific Journal of Public Health and the University of Malaya Medical Centre (UMMC) Research Bulletin are both housed in MERDU.

MERDU is a “virtual” unit, created to support the educational and research activities of academic departments, coordinating training programmes working across department boundaries and encouraging the involvement of all disciplines in the faculty to focus on the quality of the teaching and learning and research processes in the faculty.

These are exciting times for medical education. The scholarly activity of academics is research. When this is based around improving patient care this produces clinical research, for example, clinical trials or laboratory-based research. However, a neglected area of medical academic scholarly activity is the research based around improving teaching and learning of medical students. Internationally, this is now recognised as a field worthy of investigation as manifest by the publication of many journals of medical education and Best Evidence Medical Education reviews. The support that this faculty has shown to the importance of both medical education and medical research development by the creation of MERDU now needs to be rewarded

by a broadening of recognised scholarship activities to include those of clinical medical educators.

As Osler said in *Aequanimitas* (7), “A professor should have three things: enthusiasm, a full personal knowledge of his subject, and a sense of obligation to his students.” Surely a sense of obligation to our students in the 21st century must be to embrace the scholarship of education in order to produce the best possible graduates by the best possible methods.

## References

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