

Residents: ‘Near peer teachers’

Kulkarni Meenal¹

¹Associate Professor, Department of Community Medicine, NKPSIMS&RC, Digdoh Hills, Hingana Road, Nagpur-19.

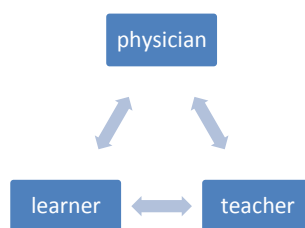
meenalkulkarni76@gmail.com

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Resident’s role is multidimensional. Primary professional responsibility of medical resident doctor is as a physician, who in hospital setting is required to provide care and good health service to patients. As aspiring specialists in their chosen fields, they are learners. Lastly, the ‘resident as a teacher’ performs the didactic function of sharing his/her knowledge with medical students in the wards, during the rounds and in outpatient clinics Resident performs an important role as a teacher. Benefits of Teaching by residents are not only limited to juniors but students, interns, paramedical and even patients get benefitted.

Key Words: Resident, Physician, Learner, Teacher

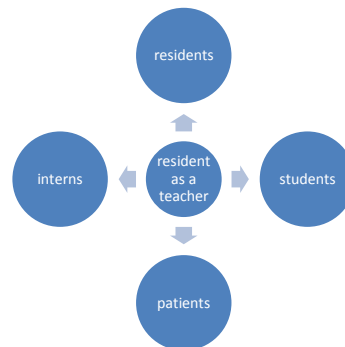
Multiple roles of a resident as a physician, learner and a teacher!



In medical profession, primary professional responsibility of medical resident doctor is as a physician, who in hospital setting is required to provide care and good health service to patients. As aspiring specialists in their chosen fields, they are learners. Lastly, the ‘resident as a teacher’ performs the didactic function of sharing his/her knowledge with medical

students in the wards, during the rounds and in outpatient clinics. In practice, medical residents combine two or more of these roles simultaneously (1).

Who are benefitted by resident- teachers?



Residents are expected to teach a very diverse group of learners including medical students, junior residents, interns, health care personnel and patients.

What are benefits of teaching by resident-teachers?

There is enough proof in literature explaining why medical residents should teach. Residents in all disciplines are teachers and role models for medical students. Residents known as ‘Near peer teachers’, resident-teachers are ideally placed to pass on their knowledge and experience to more junior learners (2).

Residents viewed teaching medical students as one of their primary responsibilities and estimated that they spent 25% of their time in teaching (1). A multi-Institutional qualitative study conducted focus group discussions with medical students in US medical schools. Almost 200 comments representing the knowledge and skills students learned from residents were categorised into 33 themes within nine domains such as patient care, communication, navigating the system, adaptability, functioning as a student /resident, lifelong learning, general comments, career/professional development and medical content (3).

A cross-sectional survey was conducted in the largest medical school in Mexico and Latin America to find out opinions, attitudes and preferences about the resident's teaching role and training in medical education. Residents were spending 32.3% of their time in educating health care personnel (nurses, medical students, interns and other residents). There was higher reported use of time in teaching as they advanced in their program, from 25.8% in first year to 38% in third year of residency. Regarding ranking of the time dedicated to teach other members of health care team, their first priority were other residents, followed by interns, medical students and nurses in that order. Almost 90% of the residents agreed with the need of training programme in educational strategies during residency programme. 90% of them agreed that 'learning to teach improves the quality of medical care' (4).

Resident doctors contribute significantly to the quality of undergraduate medical training and it is assumed that by participating in the process they also improve their own professional competency (1). Teaching has a direct impact on patient care. Teaching is a basic skill needed for excellent patient care. Regardless of an intended career in academics or practice, some background in formal teaching is necessary. The same skills used to teach medical students are found to effectively educate patients and families about diagnosis, treatment and management of illness. Therefore being an effective educator is fundamental to being a competent physician (2).

The MEU, University College of Medical Sciences (UCMS), Delhi conducted a resident-as-educator program to develop educational intervention for residents' teaching skills. Residents reported positive changes and self-confidence in attitude towards teaching. They predominantly wish to apply the skills of blueprinting, feedback, effective power point and use of evaluation tools more than the other strategies (5).

Under supported role of resident as a teacher

Residents rarely are:

- Rewarded for teaching
- Given feedback about their teaching
- Have input into decision regarding teaching and curriculum
- Also resident involvement in evaluation of learners often inadequate

OSTE (Objective Structured Teaching examination)

First described in literature in 1990s, OSTES are modelled after OSCE but target led towards teaching knowledge and skills .Use of standardized students (a concept similar to standardized patients) to role play “difficult” learners adds further complexity and dimensionality to OSTE (6).

Resident-as-teacher (RaT) courses

Resident teaching courses improve residents’ self-assessed teaching behaviours and teaching confidence. Teaching courses are linked to improve student evaluations (7). Resident-as-teacher courses are pretty common in Western medical schools however they are a rarity in Asian and developing countries (5).

In summary, Resident’s role is multidimensional. Resident performs an important role as a teacher. He/she utilises major time in teaching. Benefits of Teaching by residents are not only limited to juniors but students, interns, paramedical and even patients get benefitted. Resident as a teacher (RaT) courses/training is a scientific way to improve teaching skills of residents which will help in maximizing the benefits.

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