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Theme

3G'S **in Hospital** **Management**

– Governance, Giving and Greening

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APHM
Persatuan Hospital Swasta Malaysia
Association of Private Hospitals of Malaysia

Clinical Governance: The Role of Medical Schools

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Need for reform in medicine

- Changing societal views towards the medical profession
- Wide media coverage of medical errors and controversial medical decisions
- Led society to question and be cynical about professional rights and privileges
- Public less forgiving and losing confidence in doctors and their ability to regulate themselves



Clinical Governance

- Bristol Royal Infirmary incident
- *A framework through which NHS organisations are accountable for continually improving the quality of their services and safeguarding high standards of care by creating an environment in which excellence in clinical care will flourish.*"
(NHS Executive 1999)
- a systematic approach to maintaining and improving the quality of patient care within a health system

Kennedy I. The Bristol Royal Infirmary inquiry.
London. Dept of Health; 2001



Clinical Governance

- Corporate accountability for clinical practice and is about ensuring that patients are safe and risks are managed
- Professionalism a major component of clinical governance
- Changing the culture from one of blame to one of learning



Clinical Governance

- Bring together managerial, organisational and clinical approaches to improving quality of care
- 4 main themes
 - Responsibility and accountability
 - Comprehensive quality improvement
 - Risk Management
 - Identification and remedy of poor performance



Medical Schools

- 3 main obligations
 - Teaching and learning
 - Research
 - Service
- 4th obligation (Kamien) : responsiveness and accountability to society
 - Stakeholder approach to curriculum reform

Iedema et al, Med Educ Online 2004; 9 : 17



Medical Education and Clinical Governance

- Obligation of medical schools to promote the following :
 - Critical self appraisal
 - Skills of self audit and peer audit
 - Patient safety
 - Constructive feedback
 - Reflection
 - Value medical students as colleagues

Houghton & Wall. Medical Teacher 2000; 22: 1



Educational Strategies

- Changing the culture
- Lifelong learning and CPD
- Audit and quality assurance
- Evidence-based practice
- Clinical guidelines
- Evaluation
- Learning from mistakes in a positive way - feedback

Houghton & Wall. Medical Teacher 2000; 22: 1



Changing the culture

- Culture of learning
- Culture of questioning and curiosity
- Culture of openness and transparency
- Ability to receive constructive criticism (seniors from juniors especially !!!)
- Creating a learning organisation
- Challenge not with students but with the faculty and senior consultants



Life-long learning and CPD

- From teacher-centred to student-centred (learning rather than teaching)
- Medical students must be responsible for their own learning (Tomorrow's Doctors, 2009)
- Need to learn how to access different and even contradictory sources, to assess knowledge with regard to experiential contexts and ability to deploy this knowledge
- The majority of Malaysian medical schools are shifting from a purely didactic approach



Diverse educational settings

- Expose students to various clinical settings
 - Primary to tertiary
 - Urban and rural
 - Public and private
- Learn how these settings interact with one another and understand the social and organisational intricacies and complexities of the health system
- In general students lack understanding of health systems and their interactions



Communication skills and teamwork

- Communication skills
 - Not just doctor-patient communication
 - Communication with other doctors and health care professionals
- Team work
 - Inter-professional learning
 - Ability to contribute to clinical work as a member of a team



Reflection and self-appraisal

- Critical reflection
 - Reflect and be critical of own practice for improvement of quality and outcomes
- Not a strong point among medical students
 - Lack opportunities
 - Lack skills
- Introduce strategies to promote reflection
 - Portfolios and portfolio reviews
 - Group discussions
 - Self assessments



Evidence Based Medicine and Research

- Evidence based medicine and research
 - How to access information and EBM databases
 - Skill of critical appraisal of the literature
 - Research project (which may be a clinical audit)



Quality Assurance & Patient Safety

- Quality
 - Concept of quality
 - Familiarity with quality assurance processes
- Patient safety
 - Stress the importance of a safe environment for learning and practice
 - Responsibility of students (Tomorrow's Doctors 2009)
 - Ensuring patient safety by working within the limits of their competence, training and status as medical students
 - Raising any concerns about patient safety, or any aspect of the conduct of others which is inconsistent with good professional practice
 - Putting into context the content related to patient safety



Ethics, professionalism and medical law

- Relevance
- Experiential with reflection
- Importance of role-modelling
- Fitness to practise panels
 - Medical schools are reluctant to stop a student on non-academic grounds for the fear of litigation
 - Medical schools have a duty and moral responsibility to ensure that clearly unfit students do not graduate



Conclusions

- Medical school need to promote the values of clinical governance
- Create a culture of learning
- Involves a behavioural change in students, faculty and senior consultants
- Pedagogical approaches that promotes life-long learning, learning from mistakes and continuous improvement
- Ensure content is current, relevant and meet the needs of society
- Medical schools are making changes but there is still a long way to go
- MMC must also ensure that accreditation criteria reflects current best practices

