

“This prospectus is made under the provisions of the Universities Act, the Postgraduate Institute of Medicine Ordinance, and the General By-Laws No. 1 of 2016 and By-Laws No. 4 of 2016 for Postgraduate Diplomas and Postgraduate Certificates ”

Copyright © 2015 by Postgraduate Institute of Medicine, University of Colombo, 160 Prof. Nandadasa Kodagoda Mawatha, Colombo 7, Sri Lanka.

All rights reserved. This course document is the intellectual property of the Postgraduate Institute of Medicine, University of Colombo. No part of this document may be copied, reproduced or transmitted in any form by any means (electronic, photocopying, recording or otherwise) without the prior written permission of the Postgraduate Institute of Medicine, University of Colombo.

**POSTGRADUATE INSTITUTE OF MEDICINE
UNIVERSITY OF COLOMBO**



PROSPECTUS

POSTGRADUATE CERTIFICATE IN MEDICAL EDUCATION

2012

**SPECIALITY BOARD IN MEDICAL EDUCATION
BOARD OF STUDY IN MULTIDISCIPLINARY STUDY COURSES**

Contents

BACKGROUND	3
RATIONALE FOR PROPOSED CHANGES.....	3
COURSE OUTCOMES	4
ELIGIBILITY CRITERIA.....	4
SELECTION OF TRAINEES	5
INTAKE.....	5
DURATION OF COURSE	5
FORMAT OF COURSE.....	6
APPOINTMENT OF TRAINERS AND THEIR RESPONSIBILITIES	7
ASSESSMENT	7
APPOINTMENT OF EXAMINERS.....	9
AWARD OF POSTGRADUATE CERTIFICATE IN MEDICAL EDUCATION	9
PLAGIARISM	9
ANNEX 1. COURSE MODULES & EXPECTED OUTCOMES	11
ANNEX 2. ASSIGNMENT SUBMISSION FORM	14
ANNEX 3. GUIDELINES FOR SUBMISSION OF ASSIGNMENTS	15

POSTGRADUATE CERTIFICATE IN MEDICAL EDUCATION PROSPECTUS

BACKGROUND

The Postgraduate Certificate in Medical Education (PGCME) was launched by the PGIM in 2008 with the aim of equipping health professionals with the basic expertise in knowledge, skills and attitudes required of a medical teacher. The programme was designed to suit those involved in delivering undergraduate/postgraduate medical education and other fields of healthcare delivery. It is meant to enable participants to design, deliver and evaluate effective educational programmes for health professionals.

RATIONALE FOR PROPOSED CHANGES

All probationary academic staff who join the state universities in Sri Lanka are required to follow an induction programme accredited by the University Grants Commission before they are confirmed in service. At present, such courses are offered by the Staff Development Units (SDU) / Centres (SDC) in several universities (e.g. SDC of the University of Colombo, SDU of the University of Kelaniya). There is much overlap in the broad course content of these programmes and that of the PGCME, especially with regard to trends in higher education; teaching, learning and assessment; use of modern technology in higher education; research competencies, etc. Because the PGCME addresses these areas in relation to medical / health professions education, it could be argued that the PGCME is more appropriate for university academics in the health care professions than those induction programmes conducted by Staff Development Centres /Units.

However, the UGC requires accredited induction programmes to include sessions on some areas that are specifically relevant to university academics, rather than health professionals. These include the University System in Sri Lanka, Professionalism in University Academics, and Managerial Issues.

The proposed changes to the PGCME include the addition of new modules on the above-mentioned areas, as options to be taken up by those university academics on the PGCME course. The Speciality Board plans to seek accreditation from the UGC for this extended PGCME course, as a suitable induction programme for probationary academic staff in Faculties of Medicine/Dental Sciences/Allied Health Sciences. The Board expects that obtaining this accreditation will attract more applicants for the course than at present.

COURSE OUTCOMES

The Postgraduate Certificate in Medical Education will provide participants with an overview of key issues in medical education and will enhance the participants' understanding of choice of curricula and teaching/learning and assessment methods relevant to the learning environment of their institution. The extended PGCME will provide participants with an overview of the university system in Sri Lanka, and enhance their capacity to function within the university system.

At the end of the PGCME, the trainees should be able to:

- Describe concepts and recent trends in medical education
- Reflect on and evaluate their role as trainers in medical education
- Demonstrate an understanding of the range, depth and applicability of current teaching/learning methods
- Demonstrate an understanding of the current assessment tools
- Discuss different curricular models and modes of curricular evaluation, and their applicability
- Develop/select relevant curricular models, teaching/learning methods and assessment tools to their own situation
- Demonstrate an understanding of the principles of educational research
- Plan how they can use the knowledge and skills gained for their professional development

At the end of the extended PGCME, trainees should also be able to:

- Reflect on and evaluate their roles as academic staff in the university system in Sri Lanka
- Plan how they can use the knowledge and skills gained for their professional development as university academics

ELIGIBILITY CRITERIA

To be eligible to apply for the PGCME, applicants must meet the following criteria:

- i. Hold a medical degree registered with the Sri Lanka Medical Council
 - ii. Complete an internship recognized by the Sri Lanka Medical Council
 - iii. Complete one year work experience in Sri Lanka, after internship
- OR**
- iv. Be an academic staff member in a Faculty of Medicine, Dentistry, Veterinary Science or Allied Health Sciences with a MBBS, BDS, BVSc, BSc or BA degree and three years of teaching experience at University level.

SELECTION OF TRAINEES

The **selection examination** will consist of two components: a written and an oral examination. All candidates are expected to appear for both components.

1.1 The written test (100 marks-1 hour) will consist of a paper with three structured essay questions, of which only **two questions** should be answered in **one hour**. The questions will be set on general topics in the field of medical and health professions' education, to judge the ability of the candidates to express themselves while writing in English, as well as their general ability to think logically, as well as creatively. Each question will be marked out of 100 and marked by 2 examiners. The total marks for the 2 questions will be converted to a mark out of 100.

1.2 A structured oral examination (100 marks) of 15 minutes for each candidate will be conducted by one panel of two examiners. It will be marked out of 100. Candidates will be given marks on the basis of their need for training in Medical Education and their ability to express themselves verbally.

1.3 A candidate must score a minimum of 50% (100/200 marks) of the total aggregate AND a minimum of 45% (45/100 marks) for each of the two components in order to pass the examination and be eligible for selection to the course.

INTAKE

The maximum number for a batch of trainees will be decided by the Board of Management on the recommendation of the Speciality Board and the number will be indicated in the circular and newspaper advertisement calling for applications. In the event that the number of candidates qualifying at the selection examination exceeds this number, candidates shall be ranked according to the final mark obtained at the selection examination, and those with the highest marks shall be selected to participate in the course.

The PGIM publishes notices in the leading newspapers and in its official website www.cmb.ac.lk/pgim which will be the main site carrying details of the advertisements in the newspapers, prescribing the application procedure, fees, dates of the different components of the examination etc as stipulated in the Regulations and/or Rules of the Institute thus announcing the examination in accordance with the Calendar of dates of Examinations published annually by the PGIM. In addition, the PGIM issues circulars and letters to that effect. Prospective applicants need to respond to such advertisements.

DURATION OF COURSE

The PGCME course shall be conducted on a part-time basis on week-ends over a period of 24 weeks; with another 4 weeks for the extended PGCME. The total number of credits of the course shall be 15.

FORMAT OF COURSE

The course for the PGCME will comprise of the following modules (Details Annex 1). First 10 modules are based on core content areas and compulsory for all trainees. Last 3 modules are optional.

Table 1–Credit values of the modules of PGCME

	Lectures (h)	*Field work (h)	Credits
Modules in standard course			
1. Foundation Module	8	45	1.5
2. Principles of curriculum development, planning and evaluation	8	45	1.5
3. Principles of teaching and learning	8	45	1.5
4. Large group and small group teaching	12	45	1.5
5. Integrated learning	8	45	1.5
6. Clinical teaching	8	45	1.5
7. Principles of instructional material design	8	45	1.5
8. Principles of assessment	8	45	1.5
9. Assessment instruments	8	45	1.5
10. Basic approaches to research	8	45	1.5
Total hours	84	450	15

*The term 'field work' denotes on-the job learning

Table 2–Credit values of the extra modules of the extended PGCME

Extra modules in extended course	Lectures (h)	*Field work (h)	Credits
1. The Sri Lankan university system	4	12	0.5
2. Management and finance issues	8	12	0.5
3. Professionalism and continuing professional development	4	12	0.5
Total hours	16	36	1.5

*The term 'field work' denotes on-the job learning

The course will be conducted on a part-time basis, with 4 hours of face-to-face teaching learning sessions and at least 8 hours of independent study each week. The estimated time duration for the standard course is 24 weeks; the extended course will take 4 weeks longer.

Detailed module outcomes are given in Annex 1. A variety of teaching-learning methods including group work, lectures, presentations, case studies, reflective logs, e-learning and self learning will be used to ensure maximum acquisition of knowledge, skills and attitudes. Face to face sessions will be conducted at the Postgraduate Institute of Medicine, Colombo. The learning material and methods will encourage participants to relate educational theory to their everyday practice.

APPOINTMENT OF TRAINERS AND THEIR RESPONSIBILITIES

The trainers for the course will be identified by the Speciality Board in Medical Education, from among specialists in Medical Education and trainers in higher education.

Trainers appointed by the Speciality Board shall have a postgraduate degree (Masters or Doctoral) in Medical Education, or a postgraduate doctorate and Board Certification in any other Speciality in the Medical profession.

Trainers are responsible for conduct of face-to-face sessions as well as setting and marking assignments. Trainers are expected to conduct assigned sessions as scheduled, and to return marked assignments within two weeks to the PGIM.

ASSESSMENT

1. The assessment for the PGCME will be assignment based (see Annexes 2 and 3). The number and type of assignment/s for each module is as follows.

Table 3-Assessment of individual modules of PGCME

Module	Number of assignments	Type of assignment
CM 1–Foundation module	1	Written assignment
CM 2–Principles of Curriculum Development, Planning and Evaluation	1	Written assignment
CM 3–Principles of Teaching/Learning	1	Written assignment
CM 4–Large group and small group teaching	2	Written assignment Oral presentation
CM 5–Integrated Learning	1	Written assignment
CM 6–Clinical Teaching	1	Written assignment
CM 7–Principles of	1	Written assignment

Instructional Material Design		
CM 8–Principles of assessment	1	Written assignment
CM 9–Assessment instruments	1	Written assignment
CM 10–Basic approaches to research	1	Written assignment
CM 11–The Sri Lankan university system	1	Written assignment
CM 12–Management and financial issues	1	Written assignment
CM 13–Professionalism and continuing professional development	1	Written assignment

2. They require the synthesis of theory and practice with worked examples from the student’s own professional experience.
3. Learning outcomes are stated for each module. These outcomes must be met in the assignment. The student is required to demonstrate mastery of the concepts and principles introduced in the module and their application to the student’s own teaching and learning situation. There is a range of generic competencies that must be demonstrated throughout the course in identifying and responding to learners’ needs, and enhancing professional reflection and development.
4. The module assignments are designed to assess trainees’:
 - understanding of the principles and concepts;
 - ability to apply appropriately the concepts and principles in their own situation;
 - analytical ability regarding the application of the principles and concepts to their own situation
 - ability to reflect critically and analyze the approach they have developed.
5. Assignments will be made known to the trainees before the end of each module, along with the deadline for submission. Written answers must be submitted to the Examinations Branch of the PGIM no later than 2 weeks after completion of the module with a cover sheet shown in Annex 2. Guidelines for preparation of written assignments are given in Annex 3. Assignments will not be accepted after 4 weeks from the due date. Oral presentations must be made on the dates scheduled by the Speciality Board.

6. Assignments will be graded as follows:

Table 4–Grading criteria for the PGCME assignments

Grade	Descriptor
A = MERIT PASS	Work is well-organized and demonstrates ability to reflect, select, integrate, interpret, and evaluate. Evidence of originality
C = PASS	Limited ability to integrate and interpret. Work less well organized. Factual errors and/or omissions are few.
D = FAIL	Poor level of understanding with little effort to integrate or interpret. Several errors of fact and/or serious omissions.
E = BAD FAIL	Totally unsatisfactory and very poorly organized. Irrelevant and full of factual errors and serious omissions.

APPOINTMENT OF EXAMINERS

Each assignment shall be assessed by two examiners appointed by the Speciality Board. They will be specialists in Medical Education (i.e. having at least a Masters in Medical Education) and/ or those who have an appropriate training in higher education. If the examiners are appointed from the latter category, their appointments will be subject to the approval of the Speciality Board in Medical Education, Board of Study in Multi Disciplinary Study Courses, and Board of Management of PGIM, and the Senate of the University of Colombo.

AWARD OF POSTGRADUATE CERTIFICATE IN MEDICAL EDUCATION

1. In order to be eligible for award of the PGCME, trainees must attend at least 80% of the scheduled face-to-face sessions over the entire course, AND at least 50% of the sessions in each module.
2. Trainees must obtain at least a C grade for each module in order to be eligible for award of the Certificate.
3. Trainees who obtain D or E grades will be required to re-submit their assignments within 2 weeks, having first met their respective examiner(s) who marked the assignment(s). A maximum of two resubmissions are permitted per module. A resubmitted assignment cannot be awarded a grade higher than 'C'.

PLAGIARISM

Plagiarism is the unauthorized use of the language and thoughts of another person, and presenting them as one's own. This includes the work of another student, or materials from textbooks, journal articles, software libraries, web pages etc. It is scholastic dishonesty because it gives the reader the impression that the student has written or thought the ideas that he or she has, in fact, taken from another source.

The PGIM treats cases of plagiarism extremely seriously. The assessor will initially deal with the issue. If the assessor is convinced that plagiarism has taken place, he/she shall report the case to the Director/PGIM, who will then deal with the matter according to the PGIM Code of Conduct. Stern measures will be taken against those who are guilty of plagiarism. They will be reported to the PGIM Board of Management and the Examinations Committee of the University of Colombo.

ANNEX 1. COURSE MODULES & EXPECTED OUTCOMES

CM 1-Foundation Module

- Identify the medical professional's role as a teacher
- Describe the history & evolution of medical education
- Describe recent trends in medical education
- Demonstrate an understanding of the generic knowledge needed as a professional in medical/ health professions education i.e. theories of behaviourism, reflection, teamwork, leadership, change management, etc
- Evaluate their own role in education at their institution and identify appropriate use of such knowledge

CM 2-Principles of curriculum development, planning & evaluation

- Demonstrate an understanding of the trends in curriculum development
- Identify the concepts of formal/ informal curriculum and hidden curriculum
- Develop appropriate educational strategies for curriculum development in their situation
- Evaluate a course with which they are involved in terms of SPICES model/Harden's 10 questions

CM 3-Principles of teaching/learning

- Demonstrate an understanding of theories of constructivism/schema building, learning theories, styles of learning, adult learning
- Identify current trends in teaching/learning
- Describe the situation in their own institution with regards to these trends
- Evaluate diverse teaching methods in their potential to facilitate learning

CM 4-Large group and small group teaching

- Describe and compare the aims and characteristics of large and small group teaching
- Determine when large and small group teaching is appropriate
- Describe different methods of large group learning and their applicability
- Describe the dynamics of small groups
- Define the role of the facilitator and the participant
- Describe different methods of small group learning and their applicability
- Plan and conduct a teaching session using principles of large group teaching

CM 5-Integrated learning

- Describe recent advances and uses of integrated learning in medical education
- Identify the different levels of integration in a medical curriculum
- Demonstrate an understanding of different methods of achieving interdisciplinary integration and assess their suitability for use in their own institution

CM 6-Clinical teaching

- Identify current trends and practices in clinical teaching (ward/ambulatory care)
- Relate these trends and practices to the principles of teaching/learning
- Evaluate the applicability of these trends and practices to their own situation

CM 7-Principles of Instructional material design

- Identify current trends on instructional material development
- Describe the uses and limitations of printed/IT based instructional material
- Evaluate their applicability to their own situation

CM 8-Principles of assessment

- Identify current trends in assessment
- Describe the differences between formative and summative assessment
- Describe the concepts of test validity and reliability

CM 9 - Assessment instruments

- Evaluate different assessment tools in relation to Miller's pyramid of assessment
- Develop appropriate assessment strategies for their teaching programme
- Demonstrate an understanding of the principles of portfolio assessment

CM 10-Basic approaches to research

- Describe the scientific method
- Identify the key aspects in problem selection and formulating a research plan
- Describe the circumstances in which experimental, historical, descriptive, co-relational, causal-comparative and action research approaches are used
- Explain the differences between qualitative and quantitative research

CM 11-The Sri Lankan University system

- Outline key aspects of the Universities Act of 1978 and the role of the various authorities in the state university system in Sri Lanka
- Describe the duties of academics in the state university system
- Recognise the present set of requirements that he/she needs to meet in preparing the trainees for local and international environment
- Discuss the role of non-academic staff in the university system and the rules and regulations pertinent to their interaction with academic staff
- Discuss the role of trade unions related to the university system

CM 12-Management and financial issues

- Identify administrative and financial tasks and operate effectively in carrying them out
- Plan day-to-day activities on a priority basis
- Balance the various and competing roles of being an academic to suit himself/herself and his/her circumstances
- Be aware of better managerial issues: good practices in communication, conflict resolution and human rights etc.
- Identify concepts of strategic management
- Identify tools of strategic management

CM13-Professionalism and continuing professional development

- Discuss the principal ethical issues in teaching, assessment, scientific research and publications
- Apply the principles for ethical decision-making
- Recognize and deal effectively with ethical and moral issues in the professional life including equal opportunities in the workplace, such as gender issues.
- Explain the concept of 'Professionalism' and its main characteristics, providing examples
- Describe the obligations and responsibilities of a professional
- Demonstrate an understanding of the key features of the Code of Professional Conduct and the Professional Standards as they relate to duties at the university
- Identify situations where other expertise is required and reconcile when the Code of Professional Conduct is applicable
- Understand the legal liability of a professional
- Discuss and propose options for Continuing Professional Development in the university system
- Define clear career goals for himself/herself
- Plan a strategy for getting research work published

ANNEX 2. ASSIGNMENT SUBMISSION FORM

POSTGRADUATE CERTIFICATE IN MEDICAL EDUCATION

Complete this form, attach it to your assignment and hand it over to:

Examinations Branch, PGIM No 160, Norris Canal Road, Colombo 7 OR e-mail to examinat@slt.net.lk AND post a hard copy to the above address.

Name: PGIM Roll no:

Module no:

Date of submission

TRAINER ASSESSMENT

Result: Pass Resubmission

NB. The trainer will only tick and/or comment on 1-4 if relevant to this particular assignment.

A = GOOD PASS: work is well-organized and demonstrates ability to select, integrate, interpret and evaluate.

Evidence of originality Excellent

C = ORDINARY PASS: limited ability to integrate and interpret. Work less well organized. Factual errors and/or omissions are few.

D = BARE FAIL: poor level of understanding with little effort to integrate or interpret. Several errors of fact and/or serious omissions.

E = BAD FAIL: totally unsatisfactory and very poorly organized. Irrelevant and full of factual errors and serious omissions.

Overall comments: (Should clearly indicate the reason for "FAIL" grades and give recommendations to the trainee to upgrade to "PASS")

Assessor's signature..... Date:

ANNEX 3. GUIDELINES FOR SUBMISSION OF ASSIGNMENTS

General guidelines

1. The module for which the assignment is submitted and the PGIM roll number of the student must be clearly indicated at the top of the document. Every assignment should be submitted with a duly filled submission form.
2. An ideal length of text is approximately 1000–1500 words, equivalent to about 2–3 pages. The report should be word processed and printed single-side only, on A4 size photocopying paper with line spacing not less than 1.5 and lettering in Times New Roman, font size 12. Pages should be numbered consecutively in the bottom right hand corner.
3. References are very important and must be complete and accurate to enable the reader to identify and retrieve them. All literature referred to must be listed at the end of the assignment. The references should be listed in the Harvard style (author, date).
4. Assignments should be submitted no later than 2 weeks after being set by the relevant teacher.
5. PGIM Examinations Branch will place a date stamp on the assignment when accepting it.
6. Hard copies of the assignments have to be submitted to PGIM Examinations Branch. Soft copies may be sent by e-mail to the PGIM Examinations Branch and accompanied by a hard copy sent by regular mail to the same.

Writing references and bibliography

References are very important and must be complete and accurate. All literature referred to must be listed at the end of each essay or other assessed work. The references must be listed in a consistent form and style, and must contain sufficient information to enable the reader to identify and retrieve them.

There are different styles of citing sources, listing references and compiling a bibliography. The Harvard style (author, date) is widely accepted in scholarly and scientific writings and is recommended for trainees.

The Harvard Style

The Harvard Style is often known as the ‘author-date’ system. Generally, when using the Harvard system, a citation in the paper requires only the surname of the author (or authors) and the year of publication. If there are only two authors, give both names; for more than two authors, use *et al.* Citations should, whenever possible, be placed at the end of a sentence, before the concluding punctuation. For example:

There is consistent urban bias in the provision of health services (Sawyer, 1999).

Alternatively, the author's name may be integrated into the text, followed immediately by the year of publication in parentheses.

Sawyer (1999) observes that...

If there is more than one reference by the same author(s), the references should be listed chronologically in order of year of publication.

If there is more than one reference by an author in the same year, label with a lower case letter 'a' before 'b', 'c', etc.

Other researchers (Tang 1998a; Cleg 1999) have highlighted this inadequacy, while Tang (1998b) argues that...

References cited only in tables or in legends to figures should be in accordance with a sequence established by the first identification in the text of the particular table or illustration.

Rules

The arrangement of the references at the end of the report should be alphabetical. The order of the items in each reference should be:

- (a) For journal references: name(s) of author(s), year, title of paper, title of journal, volume number, page numbers.
- (b) For book references: name(s) of author(s), year, title of book, edition, volume, chapter and / or page number, town of publication, publisher.

Authors' names should be in roman letters and arranged thus:

Smith, C.O., James, D.E. & Frank, J.D.

Note the use of the ampersand (&) and the omission of comma before it. Where an author's name is repeated in the next reference, it should also be spelt out in full. The year of publication should be surrounded by parenthesis: e.g. (1999). The title of the paper is then included, without quotation marks: e.g. Child health promotion in developing countries. The journal title should be unabbreviated, underlined and be followed by volume number in bold, and the page numbers (first and last page numbers). It should read like this:

Health Policy and Planning **14**: 1; 1-10.

Examples

1. **Journal article 1:** Ehiri J.E. & Prowse J.M. (1999) Child health promotion in developing countries: the case for integration of environmental interventions? Health Policy and Planning **14**: 1; 1-10.

2. **Journal article 2:** Tuku A.B., James D.E. & Okada F.C. (1999) The response of factor B to factor C. Biochemical Journal **151**: 2; 1049 – 1053.
3. **Book:** Harris G.W. (1955) Neural Control of the Pituitary Gland. London: Arnold.
4. **Chapter in a book:** Sloper J.C. (1966) The experimental and cyto-pathological investigation of neurosecretion in the hypothalamus and pituitary. In: The Pituitary Gland, eds. Harris G.W. & Donovan B.T. Vol 3. Ch 7. London: Butterworth.

Websites:

Author's name (if available) must be listed first, followed by the full title of the document in italics, the date of publication or last revision (if available), the full http address (URL) enclosed within angle brackets, and the date of visit in parentheses. E.g.

Schettler T., Solomon G., Burns P & Valenti M. Generations at risk: how environmental toxins may affect reproductive health in Massachusetts. <<http://www.igc.apc.org/psr/genrisk.html>> (24/08/1999).