



DEPUTY VICE-CHANCELLOR'S COMMUNIQUE

THE SOUTH AFRICAN ASSOCIATION FOR HEALTH EDUCATIONALISTS CONFERENCE 2013

I am very pleased that staff in the College of Health Sciences hosted the South African Association for Health Educationalists Conference 2013. It is important for us to develop critical mass of activity in key areas of importance to the members of the College, and which will translate into more effective delivery of our core business, as well as improving on Health Science service delivery through increased competency of graduates.

While the College has embraced development of research outcomes, we also need to build on the tradition of excellent Health Sciences Practitioner training, and the College has identified research into our Teaching and Learning as a key strategic area to promote and develop.

There are many challenges facing teaching and learning in the College, some of which result from the particular and peculiar nature of the curriculum and necessary outcomes, some which relate to the legacy effects, and some that are generic issues of teaching and learning in South Africa and globally. There is no question that research into all aspects of Health Sciences Education will add value to the vision and mission of the College.

This conference encouraged a robust and wide discussion by the various groups and defined some key collective problems to address over the next few years. Working together we can innovate in curriculum and practice such that we add value to the teaching and learning activities of the academics and the students.

I am especially proud of the many contributions made by academics based in the College to the Conference which resulted in staff presenting 23 oral presentations, chairing sessions and presenting on 3 posters. I am sure that ongoing commitment to research in this area, and translating it into practice within our teaching and learning, will create a very strong node of activity with global reach and impact. With my own interest and involvement over the years in curriculum development and transformation, I find the innovations summarised in the communique very exciting!

Professor Rob Slotow
Deputy Vice-Chancellor and Head
College of Health Sciences

SAAHE CONFERENCE HIGHLIGHTS



The theme for this conference “Information to Transformation” was inspired by the Lancet’s global independent commission report. Here the call for Health professionals for a new century was made and the need to transform education to strengthen health systems in an interdependent world was highlighted.

As we take up this challenge, the SAAHE 6th National conference created a platform that charted a way forward for us and stimulated the rethinking for reforms of professional education. The conference resulted in a wonderful variety of health professionals, educators, practitioners, students and leaders coming together to participate, share and collaborate in health professions education research to produce the highest quality Health Professionals for the 21st century.

The conference provided us with a platform to congratulate and join the Sub-Saharan African FAIMER Regional Institute (SAFRI) in their 5th year celebration. SAAHE acknowledged their contribution to the national conference and applauds the building of medical education and research capacity in Africa. We wish them well in all their endeavours.

We wished success to the Centre for Rural Health-UKZN with their launch of FoRCE –Forum of Rural Clinical Education - at SAAHE, and to The Academy of Sciences of South Africa (ASSAF). ASSAF will commence the commissioned consensus study on the education and training of health professionals and other health care workers in South Africa in order to consolidate current efforts and enhance new efforts to address the severe quantitative and qualitative shortfall in the health workforce as discussed at the conference.

We were honoured to host outstanding national and international speakers of note and delegates from India, Brazil, America, Europe, Pakistan and Africa. The conference provided a platform for delegates to network and paved the way forward for health sciences education.

Best regards
Dr Veena Singaram

FORUM FOR RURAL CLINICAL EDUCATION LAUNCHED AT SAAHE CONFERENCE

An emerging community of practice that supports rural clinical training was launched at the 2013 SAAHE Conference by the Chairperson of the South African Committee of Health Science Deans, UKZN's Professor Sabiha Essack .

ForCE is the Forum for Rural Clinical Education which came out of a meeting held at the University of the Witwatersrand the previous year where the notion of supporting rural academia was explored.

From the facilitation process as part of the initial workshop, the forum has identified key areas of focus for the inclusive discussion forum and regular meetings. This forms part of SAAHE and future Rural Health Conferences.

ForCE will also propose a more formal, representative structure that would be able to engage with key role players in the field around research and policy and take the advocacy for the development of a rural teaching platform forward.

Dr Bernhard Gaede, Director for UKZN's Centre for Rural Health, said ForCE emphasizes not only the national and international imperatives for needing to develop a rural teaching platform, but also the need for a community of practice that grows the experience and evidence of such a multi-disciplinary and decentralized approach to health professional education.

Gaede said: 'It transcends many traditional boundaries – particularly between health professions, between the university / faculty staff and the rural clinicians that often are the supervisors during the rural placements of students, and even the rural / urban divide. '



Multi-university stakeholders united the conference workshop where ForCE was launched.

EXPERIENTIAL LEARNING OUTSIDE THE COMFORT ZONE: TAKING MEDICAL STUDENTS TO DOWNTOWN DURBAN

Professor Neil Prose, a 2012 visiting Fulbright Scholar from Duke University in the United States, presented the benefits of experiential learning “outside the comfort zone”, reflecting on the day he took a diverse group of medical undergraduate students from UKZN to the local Traditional Healers’ Market and a mosque as part of a cross-cultural communication lesson.

Prose said: ‘The ability to communicate across cultures requires a combination of knowledge, skills, and attitude. Our current medical school curriculum includes innovative methods of teaching communicative knowledge and skills. The challenge is how to teach students how to interact with empathy in the multi-cultural society that awaits them. Various methods of teaching empathy have been utilised worldwide but this particular presentation reflects on an experiential learning activity that yielded positive results.’

He said he believes that students need to be involved in experiential learning that encourages them to examine their attitudes, and to develop curiosity about and respect for patients coming from cultures other than their own. ‘We describe an innovative, experiential approach to learning, and suggest ways in which learning experiences of this type can be integrated into the MBChB program.’



Undergraduate medical students had an enthralling cultural learning experience during an excursion that encouraged empathy and respect in cross-cultural communication.

THE NEGLECTED GRASS ROOT ADOPTION OF MOBILE PHONES AS 'LEARNING TOOLS' IN RESOURCE-LIMITED SETTINGS

An insightful presentation on mobile learning and mobile health interventions was delivered by Professor Petra Brysiewicz, UKZN expert in emergency healthcare from the School of Nursing and Public Health.

The study – originating from advanced midwifery education in KwaZulu-Natal –acknowledged that mhealth and mlearning interventions fail because they adopt a techno-centric view and ignore the local context. To address this, the researchers investigated the 'organic' adoption and educational usage of mobile phones by health workers in rural health settings.

The research revealed a number of unexpected learning and teaching practices based on the grassroots adoption of mobile phone functions and in particular, social applications (apps). These practices involved cognitive, teaching and social presence as well as reflective practice and enabled rich educational experiences – according to the Community of Inquiry Theory which was used in the study's methodology.

Brysiewicz explained that 'traditional' communities of inquiry are based on pre-determined online environments. 'By contrast, learners used bundles of phone-based functions/apps to embed mobile and blended communities and other resources that were fragmented across social, temporal, topical, geographical, digital and 'real' spaces in the inquiry process in very dynamic ways.'

It was reported that in view of future mHealth and mobile learning efforts, mobile phones appear to be particularly suitable to facilitate competence development in the following ways:

- problem solving and situated co-construction of local knowledge
- socio-cultural participation, to alleviate professional isolation
- connecting learning in workplaces with formal education systems; and
- addressing unpredictable opportunities and challenges that are typical for the changing and provisional (health) contexts observed

Brysiewicz said: 'Instead of ignoring the revealed practices, health and education institutions are well advised to support learners in media literacy - enabling them to more effectively and critically use existing (mobile) technologies.'



Professor Petra Brysiewicz

ISIZULU VIDEOS ENHANCE THE TEACHING OF COMMUNICATION SKILLS IN THE MBChB PROGRAMME



Dr Margaret Matthews and Ms Roshnee Gokool

A study on the use of isiZulu videos as a 'teaching aid' of clinical communication skills in the MBChB Programme is being polited by UKZN researchers: Dr Margaret Matthews, Dr Paula Diab and Mrs Roshni Gokool.

It is envisaged that the videos, produced in isiZulu, could bridge the language and cultural divides young healthcare practitioners my face as they step into the world of work.

The study was at the 2013 SAAHE Conference presented by Matthews, a Clinical Skills Lecturer in the College, who said UKZN found itself in a multi-cultural society wherein the challenge of equipping students to communicate with patients from different language and cultural backgrounds had to be addressed.

Only recently did UKZN pioneer the introduction of isiZulu proficiency as a module in all undergraduate degree programmes but this was not new to the College as all health sciences students are trained to perform optimally in the urban and rural healthcare settings. This is in line with the Health Professions Council of South Africa requirements which state that communication is a core competency for medical students.

Matthews said isiZulu was an imperative for UKZN medical students, and the MBChB Programme had since 2010 used the Calgary-Cambridge Method for teaching and learning communication skills in medicine. In addition to embracing transformative learning, these efforts coincided with UKZN's Language Policy and Plan.

The driving force was that students need to be competent in interviewing patients and in explanation and planning. In their study, Matthews and her team aim to equip them with good isiZulu language and communication skills in order to improve student-patient communication and instil a patient-centred approach. 'The ultimate goal is to enhance retention of doctors in the public service through this endeavour.'

The researchers developed four scenario-based videos in isiZulu in order to provide basic and some extended vocabulary around themes that were chosen from the MBChB

preclinical years. The biomedical content includes 'supported learning' within the themes and highlights culturally sensitive topics. In addition to content, process skills in communication, especially those relevant to second language Zulu speakers, were emphasised.

Matthews said the videos will expose the students to language and sociocultural factors in health and illness with an intention to sensitise them to content knowledge in terms of common topics as well as communication skills. The team used a combination of image, text and sound to simulate authentic clinical settings in the videos, and their accessibility in the student LANs provided opportunities for revision and discussion.

Matthews said such videos were a unique and versatile tool that could be used in a variety of ways to achieve many different learning outcomes. 'The use of the videos fills a gap in communication which is vital to bridge language and cultural divides.'

It was said that the videos can be further developed to encompass a wider range of topics, with extended vocabulary and content. Potential existed for developing content for specialist disciplines and other health professions, and a proposal was being drafted to integrate further teaching of isiZulu with clinical communication in the pre-clinical themes and clinical blocks.

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QUALITY CLINICAL BEDSIDE EDUCATION VITAL - VISITING PROFESSOR OF MEDICINE



Professor Rita Sood

Quality teaching of clinical medicine to MBChB students is crucial for effective service delivery to ensure effective patient care, according to Professor Rita Sood, a Professor of Medicine and practicing internist at the All India Institute of Medical Sciences (AIIMS) in New Delhi.

Sood was speaking at a public lecture on UKZN's medical campus following the 6th National Conference of the South African Association of Health Educationalists (SAAHE).

She presented various strengths and challenges of clinical bedside education in training today's medical doctors.

The public lecture was hosted by the School of Clinical Medicine in partnership with the Health Professions Education Research Group of UKZN's College of Health Sciences.

At the SAAHE conference, Sood presented a plenary on the topic: Faculty Development for Transformative Education. She turned the spotlight on the significance of clinical bedside teaching and assessment, urging clinical educators to involve patients in the educational process of training doctors as this provided invaluable opportunities.

Reflecting on teaching practices in India, Sood said it was important to monitor and understand what the final-year doctor was able to do, how the doctor could approach the profession, and how they perceived themselves as professionals.

Sood promoted the international One-minute Preceptor Model which she identified as the framework around which the teacher-student conversation could be structured during assessment. She said the perceptive micro-skills were useful in the short term with engaging the student and probing supportive evidence for their diagnosis. 'Reinforce what was done well, correct mistakes and teach general rules and principles,' she advised.

Sood said clinical education was not limited to the hospital bedside. The clinical environment also included teaching and learning in ambulatory settings, emergency departments, pre and post-surgery and even home visits.

She said the strength of clinical training was that it was 'facilitatory' and there was an opportunity to 'humanise' care by involving patients. The educator could directly observe students' skill, role model skills and attitudes, this was an active learning process in which adults learn best. It emphasized team approach and encouraged the use of understandable non-verbal language.

Professor Miriam Adhikari, former Head of Paediatrics and Research Co-ordinator in the Postgraduate Office of UKZN's School of Clinical Medicine, identified many similarities in the strengths and challenges of clinical bedside teaching and assessment in India and South Africa.

Adhikari said: 'We have to give the student the correct perspective in order to manage the patient. One of the components is to highlight for the student what is important for them to assimilate around the patient. Of course that is not the final thing. The student goes on learning and reading around it to give them the basics.'



FAIMER MEMBER CONDUCTS UKZN MEDICAL WORKSHOP



Professor Stewart Mennin conducts an experiment with workshop participants.

UKZN's School of Clinical Medicine and the College of Health Sciences' (CHS) Health Professions Education Research Group hosted a stimulating workshop as a follow-up to the 6th National Conference of the South African Association of Health Educationalists (SAAHE).

The workshop was conducted by Professor Stewart Mennin, an international faculty member of the Foundation for the Advancement of International Medical Education (FAIMER), whose current interests are in the application of complexity science concepts to the health professions, including medical education, leadership, management, change and sustainability of programmes.

Mennin had presented a plenary on Technical Information, Adaptive Transformation and the Future of the Health Professions at the SAAHE conference.

In his talk at the workshop titled: Integration and the Sciences Basic to Health Care: What? So What? Now What?, Mennin presented his view of the future of health professions education which he said would include 'adaptive action' achieved through the notions of praxis, integration, problematization and humanization. The use of technology would be crucial in the facilitation of these processes.

He argued that identifying gaps in medical education provided an opportunity for growth, and institutions of higher learning needed to discard the underlying fear of losing their identity through integration of curricula.

He said he saw no reason why examining clinical skills, physiology and anatomy, for example, could not take place in the same assessment in a meaningfully integrated way as opposed to separate subjects being in close proximity as proximity did not imply integration.

Mennin said applying technical approaches to relational issues in health education should be avoided. As science was fundamentally rooted in observation and analysis rather than synthesis, health educationalists needed to ask: 'What are

the patterns we see, so what difference does it make and what shall we do?’

According to Mennin, structure emerges when there are clear boundaries, recognising significant differences and/or similarities and effective exchange between people. He termed these as ‘liberating constraints’ which were the conditions for change and adaptive action for the future. His message was that ‘learning lives in listening and disturbing the status quo’. The way to change and adapt health sciences curricula to current best practices could best be achieved through respect and embracing the need for integration where necessary.

This was supported by Professor William Daniels, Dean and Head of the School of Laboratory Medicine and Medical Sciences, who said this argument was appropriate because ‘we are working within a very dynamic environment’. Daniels said medical education was in the process of constant review hence the process of ‘do and reflect; review and come up with adjustments’, was necessary. The nature of collaboration in research, healthcare and health professions education was discussed and Daniels said much could be achieved through conducting systematic research.

UKZN ACADEMICS ACTIVE AT THE SAAHE CONFERENCE 2013

PLENARY PRESENTATIONS:

Professor Sabiha Essack and Students (UKZN): Transformative Education -The Students’ Perspective

PLENARY CHAIRS FROM UKZN:

Dr Veena Singaram

Professor Ted Sommerville

Professor Petra Brysiewicz

UKZN LED WORKSHOPS:

Professor Sabiha Essack and Professor Richard Hift (and delegates from other institutions)

ASSAF Panel Discussion: Reconceptualising Health Professional Education Training in SA

Mrs Lakshini McNamee (and delegates from other institutions)

How to design a (prize-winning) poster

Dr Jacky van Wyk, Francois Cilliers, Liz Wolvaardt & Susan van Schalkwyk (SAFRI)

How to turn your education innovation project into something publishable

Dr Bernhard Gaede (CRH-UKZN)

Workshop and launch of the Forum for Rural Clinical Education (FoRCE)

POSTER PRESENTATIONS: (category)

Dr Paula Diab (Student selection, support, retention)

Curriculum issues affecting rural origin health science students across three South African Medical Schools

Dr Paula Diab (Student selection, support, retention)

Review of final year medical students' rural attachment at district hospitals in KZN

Dr Penelope Flack (Student selection, support, retention)

Challenges faced by rural origin health science students across three South African Medical Schools: a focus on support

ORAL PRESENTATIONS

Dr Laura Campbell (Community engagement, service learning)

A qualitative exploratory study: using medical students' experiences to review the role of a rural clinical attachment in KwaZulu-Natal

Mrs Charlotte Engelbrecht (Community engagement, service learning)

What's in the knitting?

Dr Penelope Flack (Community engagement, service learning)

Clinical training in the discipline of Speech Language Pathology at UKZN: establishing a balance between service and learning

Dr Patrick McNeill (Community engagement, service learning)

Establishment of a rural clinical school in KZN: using photovoice to elicit views of rural doctors and students

Dr John Wright (Community engagement, service learning)

Assessing a directed PBL course - pitfalls and solutions (resubmission)

Dr Penelope Flack (Curriculum)

Interprofessional education in the faculty of health sciences, university of KwaZulu-Natal

Ms Deshini Naidoo (Curriculum)

Preparedness of Graduates in Occupational Therapy for Clinical Practice: Perceptions of Students and Supervisors in a Kwazulu-Natal Case Study

Ms Urisha Naidoo (Curriculum)

Predictors of success for first year students in health sciences: how useful are

secondary school factors?

Dr Pratima Singh (Curriculum)

Evaluation of a Dental Therapy Curriculum using Mixed Methodology

Dr Sindi Mthembu (eLearning, Technology)

Postgraduate students' perception of online learning in a Selected Nursing Education Institution in KwaZulu-Natal

Professor Petra Brysiewicz (eLearning, Technology)

The neglected grass root adoption of mobile phones as learning tools in resource-limited settings. A study from advanced midwifery education in KwaZulu-Natal, South Africa

Dr Neil Moran (Ethics, Professionalism)

Essential Steps in the Management of Obstetric Emergencies (ESMOE)

Mr Moise Muzigaba (Ethics, Professionalism)

Towards an Evidence Base for Theory-driven and Outcome-based Evaluations of Complex Medical Education Programmes: The MEPI-UKZN Example

Dr Frasia Oosthuizen (Quality assurance)

Peer assessment of quality in teaching and learning

Ms Thirusha Naidu (Social accountability)

Cross-cultural medical education: using narratives to reflect on experience

Dr Jacqueline Van Wyk (Social accountability)

Social Accountability: Using a first year project to advance the mission of a medical school.

Ms Benina Mkhonto (Student selection, support, retention)

An Assessment of the Impact of Academic Development Officers' Interventions in Challenging Modules in the College of Health Sciences at the University of KwaZulu-Natal

Dr Keshena Naidoo (Student selection, support, retention)

Students' experiences and perceptions of a community-based medical education programme at the University of KwaZulu Natal

Professor Fatima Suleman (Teaching, Learning, Assessment)

Demystifying the Myths around Online Teaching and Learning

Ms Chantel Jughoo (Teaching, Learning, Assessment)

Perceptions of the Role of Academic Development in Achieving Academic Success, in the College of Health Sciences at the University of KwaZulu-Natal

Dr Margaret Matthews (Transformation)

Use of isiZulu videos as a teaching aid in clinical communication teaching in the College of Health Sciences

Mrs Lakshini Mcnamee (Transformation)

Journey from transformative education to transformational leadership

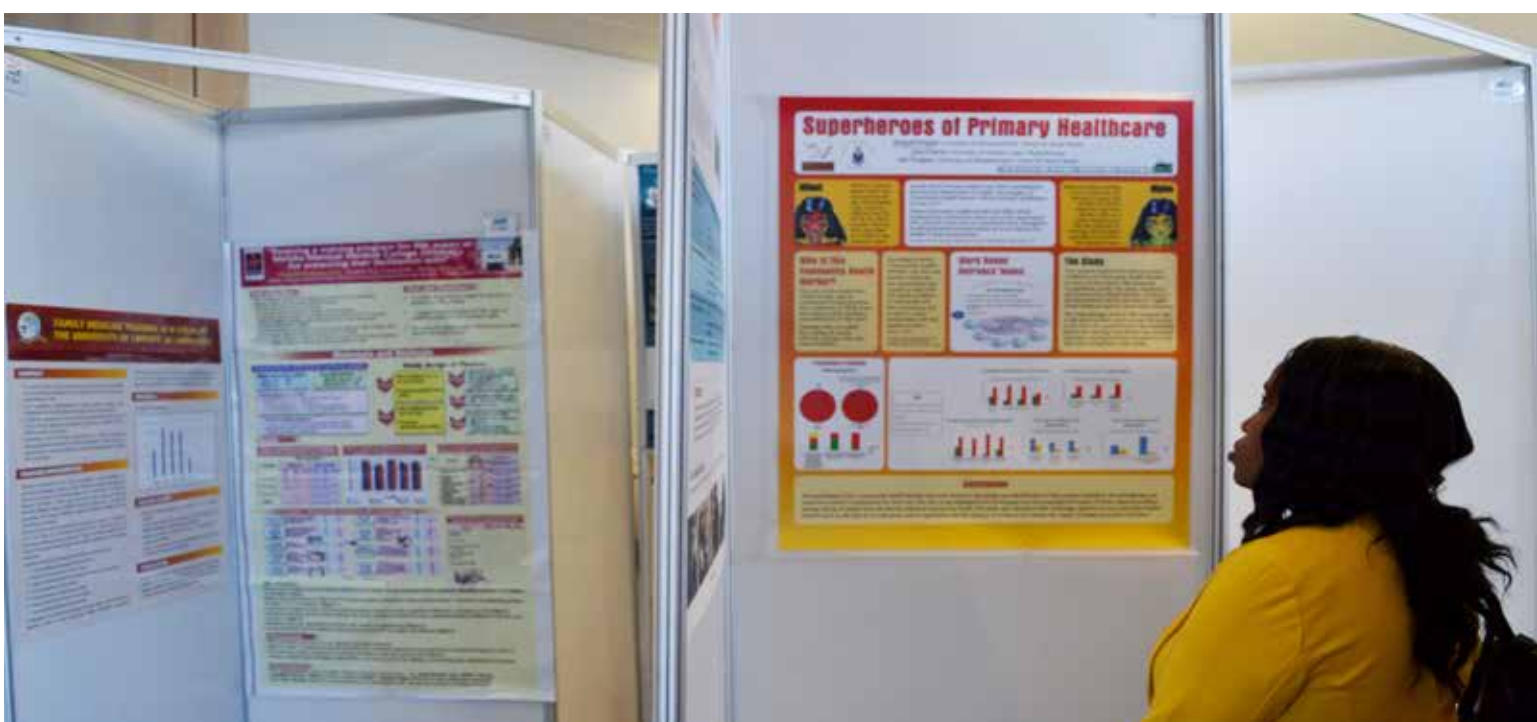
Dr Veena Singaram (Transformation)

“Looking at the glass half full” Collaborative learning as a transformative force for social inclusion

PHOTO HIGHLIGHTS



Dr Laura Campbell presented a qualitative exploratory study using medical students' experiences to review the role of a rural clinical attachment in KwaZulu-Natal.



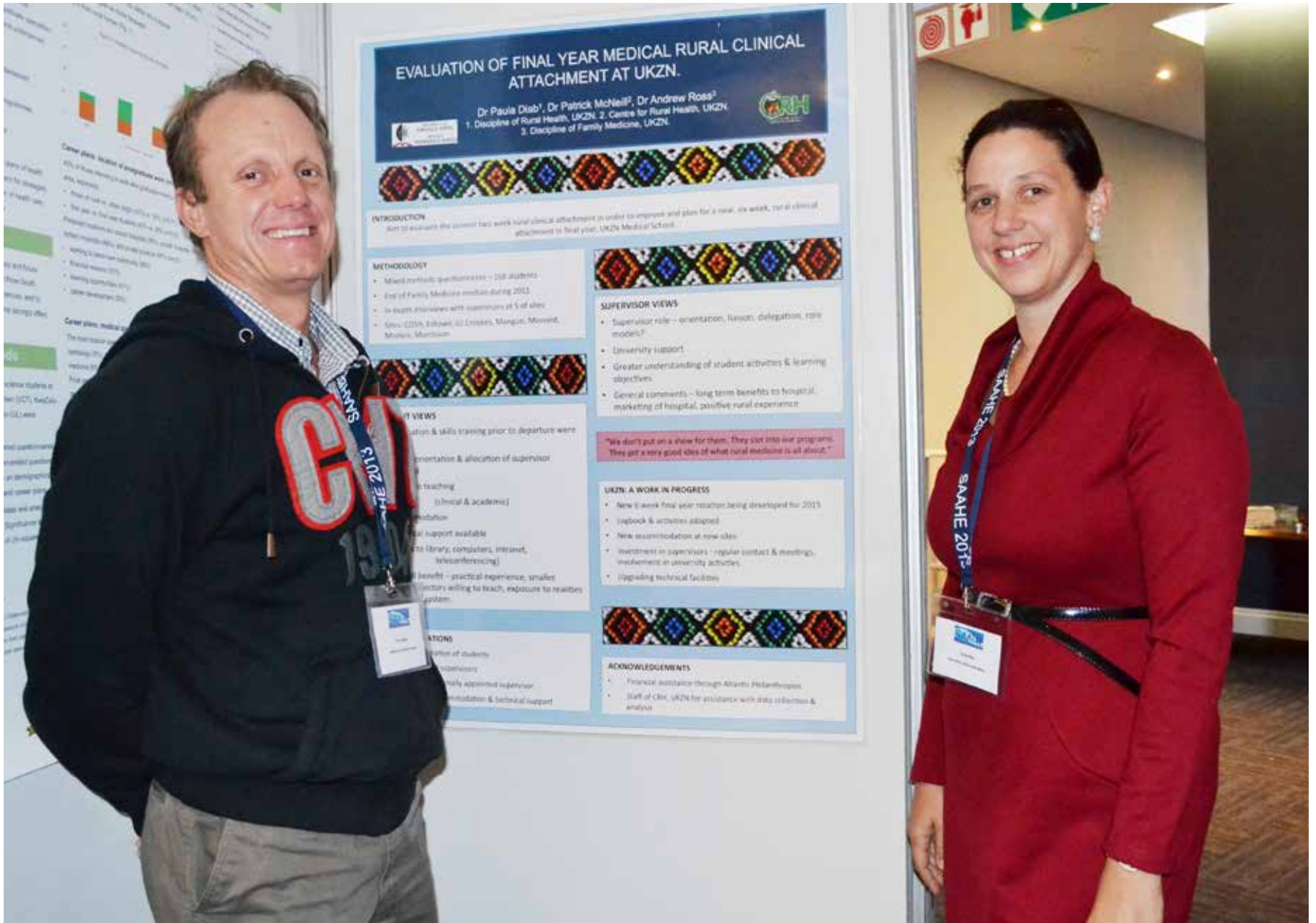
A sample of poster displays



Dr Jacqueline Van Wyk presented on social accountability using a first year project to advance the mission of a medical school.



Dr Penelope Flack presented on 'Interprofessional education' in the School of Health Sciences at UKZN.



Drs Patrick McNeill and Paula Diab on the experiences of final-year MBChB students in rural health.



Mrs Lakshini Mcnamee presented an insightful journey from transformative education to transformational leadership



Professor Fatima Suleman demystified the myths around online teaching and learning with reference to online teaching and learning at UKZN



Professor Sabiha Essack and two MBChB students presenting at a plenary session on Transformative Education -The Students' Perspective



Professor Richard Hift's opening address at the conference



Professor Ted Sommerville chaired a plenary session at the Conference