# Meeting Summary for HP 233 Thu 10 -12

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### Quick recap

The meeting focused on evaluating training programs and developing assessment tools for medical professionals, with discussions on instrument development, data collection methods, and the concept of readiness for practice. Participants explored various evaluation models, including Kirkpatrick's model, and considered different dimensions of preparedness such as knowledge, skills, and attitudes. The team also addressed technical issues, introduced new members, and planned to continue discussions on assessment instruments and evaluation methods in future meetings.

#### Next steps

- All groups to continue developing their instrument concepts and dimensions for next week's meeting.
- All participants to prepare for further discussion on instrument development in the next session.
- Nemuel to schedule and conduct the next meeting in the same channel next week.
- All groups to be ready to present updated concept maps and frameworks in the next meeting.
- All participants to focus on refining the constructs and dimensions of their proposed assessment tools.

#### Summary

### New Members and Medical School Updates

Nemuel welcomed the class and introduced new members, Miriam and Prescilla, both pediatricians. Miriam shared her experience in establishing a college of medicine in Kaviti State and her current teaching at PLM. Prescilla introduced herself as a faculty member at CNU, a new State University in Cebu. The discussion also touched on the opening of medical schools in various locations, with a focus on Mindanao and Palawan. However, technical issues with Nemuel's screen presentation were encountered, which were not resolved during the meeting.

Instrument Development and Evaluation Discussion

Nemuel led a discussion on the development and validation of instruments for research and evaluation. He emphasized the importance of understanding the process of instrument development and the need for more people to test and validate these tools. Nemuel also discussed Kirkpatrick's model of evaluation, which includes four levels: reaction, learning, behavior, and results. He asked the participants to consider what they would measure to represent reaction to a training program. Jojo suggested combining total learning and upper learning, while Ruby mentioned level 2 and 4. Genevieve also contributed to the discussion.

# Data Collection Instruments for Training

The discussion focuses on data collection instruments for evaluating training effectiveness at different levels. Nemuel emphasizes that surveys are methods, not instruments, and that the group should first define the constructs they want to measure before selecting instruments. For level 1 (reaction), they discuss using questionnaires to assess satisfaction and engagement. For level 2 (learning), options like quizzes, exams, and reflection papers are considered, with emphasis on matching the assessment method to the learning objectives.

# Inta Dashboard Evaluation and Utility

Nemuel led a discussion on the importance of understanding what to measure in a project, emphasizing the need to break down concepts into measurable elements. Carmel presented an evaluation plan for the summative evaluation of the perceived utility of Inta dashboard in team-based learning among senior clerks, postgraduate interns, and teachers in Sibu Institute of Medicine. The evaluation aimed to determine if Inta dashboard should be continued or terminated as a teaching method. Ruby and Serah further elaborated on the evaluation, focusing on the perception of Inta dashboard among students and faculty members. They proposed using questionnaires with a 5-point agreement scale as the assessment tool. The ultimate goal of the evaluation was to decide whether to continue or discontinue the use of Inta dashboard for team-based learning.

# Perceived Utility in TBL Dashboard

The team discussed the concept of perceived utility in the context of their platform, specifically the dashboard. They clarified that the platform is used for team-based learning (TBL) sessions, both online and face-to-face, and that the dashboard is utilized to facilitate these sessions. The team also emphasized that the dashboard is not just a tool for TBL, but

also for other aspects such as immediate feedback, ongoing learning, and participation. They acknowledged that the dashboard has made the TBL process more efficient, as it was previously done manually. The team agreed to evaluate the effectiveness of the dashboard in achieving TBL objectives.

### Defining Utility for Instrument Development

In the meeting, Nemuel guided the team on how to define and break down the concept of utility into its elements for better understanding and development of their instruments. He emphasized the importance of breaking down the concept into dimensions and elements, and then further into their subconstructs. He also stressed the need for direct evidence of learning and not just perception. The team discussed the dimensions of utility, including immediate feedback, engagement, learning experience, collaboration, and convenience. They also discussed the need for a more detailed evaluation of the platform's performance and its contribution to learning. The team agreed to continue with the presentation and to explore the concept of utility further.

### Self-Assessment Tool for Physician Preparedness

The team discussed the development of a self-assessment tool for newly licensed physicians to gauge their preparedness for residency training. The tool, which will be on the side of the graduate, aims to help physicians evaluate if their idea of residency aligns with reality. The tool will also be used by training programs for research purposes, such as balancing expectations during the admission process and evaluating their screening processes. The team also discussed the dimensions of knowledge, skills, and attitudes that contribute to preparedness, and potential indicators to measure these dimensions. The tool will be used to assess the physician's clinical skills, communication skills, management and critical thinking skills, and attitudes such as resilience, work ethic, and professionalism. The team also discussed the potential use of the tool in identifying physicians who may not be ready for residency training.

### Assessment, Readiness, and Predictive Tool

In the meeting, Nemuel and Felice discussed the focus of their self-assessment, with Nemuel emphasizing the importance of readiness in terms of medical competencies and other readiness aspects. They also discussed the concept of preparedness, with Felice suggesting that commitment is a key factor. The conversation then shifted to the development of an instrument to predict future behavior, with Nemuel suggesting that they could use the experiences of those who have successfully completed residency to develop this tool. The conversation ended with Nemuel proposing that they could use their instrument multiple times to test its validity and predictive value.

### **Evaluating Training Programs Effectiveness**

Nemuel led a discussion on the importance of evaluating training programs, emphasizing the need for a structured approach to assess their effectiveness. Jojo and Carlo proposed a self-administered questionnaire using a 4-5 point Likert scale for evaluation, with a focus on the residents' perspective. They also suggested conducting a systematic review of articles and focus group discussions to identify the objectives of the evaluation. The ultimate goal of the evaluation, as agreed upon by the team, was to assess the effectiveness of the training program.

# Picture Concept and OB-GYN Assessment

Nemuel discussed the concept of a picture that would appear when a certain process is completed, emphasizing the importance of the dimensions that would bring him to that picture. Jojo acknowledged Nemuel's points. Genevieve presented a proposed assessment instrument for graduating OB-GYN residents, aiming to ensure they are competent, confident, and prepared to provide high-quality patient care. She highlighted the importance of assessing readiness for practice, especially in a specialized field like OB-GYN. Malou then elaborated on the conceptual framework for assessing readiness, which includes foundational elements such as curriculum, clinical exposure, supervision, and self-directed learning. She also discussed core competency domains like clinical competency, surgical procedures, professionalism, and system-based practice. The team agreed to further explore the assessment methods for these domains.

### Assessing Readiness Dimensions and Instruments

Nemuel led a discussion on the concept of readiness, focusing on the dimensions of comfort and skill. He emphasized the importance of considering multiple dimensions when assessing readiness, and questioned whether comfort should be a prerequisite for readiness. The team also discussed the development of instruments to measure readiness, with Nemuel suggesting that the instruments should be designed to capture the dimensions of comfort and skill. The conversation ended with plans to continue the discussion in the following week.

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