



SURMEPI



Finding the balance between patient-centered learning and academic learning in a LIC program.

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Website: <http://surmepi.sun.ac.za>

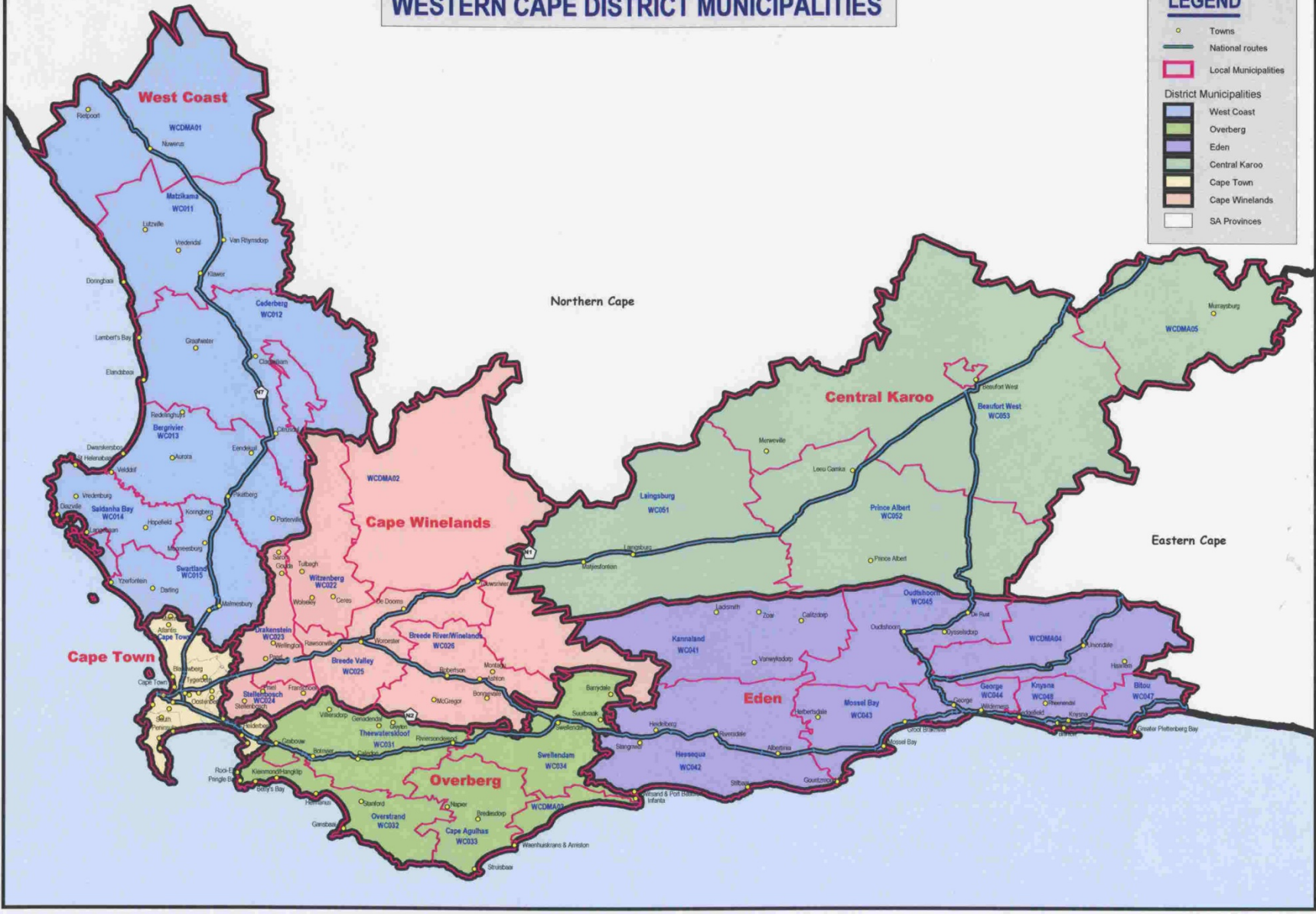
WESTERN CAPE DISTRICT MUNICIPALITIES

LEGEND

- Towns
- National routes
- Local Municipalities

District Municipalities

- West Coast
- Overberg
- Eden
- Central Karoo
- Cape Town
- Cape Winelands
- SA Provinces



Ukwanda Rural Clinical School

- Final year Student Interns (6 year undergraduate program)
- Educational model
 - Traditional model at Regional Hospital
 - Longitudinal model at District Hospital
- The Tutors
 - Regional hospital specialists
 - District hospital family physicians

Longitudinal model – district hospitals



Monday	Tuesday	Wednesday	Thursday	Friday
Service learning	Service learning	Academic day	Service learning	Service learning

Structured portfolio interview

- ❑ Student collates portfolio of patients managed
- ❑ Assessed by discipline specific specialist and family physician
- ❑ Examiners selects 2 patients
- ❑ Structured 15-minute interview per patient
 1. Diagnosis made
 2. Supporting evidence
 3. Other diagnoses considered and eliminated
 4. Appropriate investigations
 5. Treatment plan
 6. Basic science concepts relevant to patient discussed

Tutorials

“We had a lot of sessions with consultants, where we’d actually sit down and discuss portfolio cases, which was very important. A lot of patient-centred discussions, so it wasn’t just like at Tygerberg where we discuss a topic, which makes no sense if you don't have a patient to have it based on “.

EBM

- Evidence Based Medicine was identified as being a desirable approach to validating treatment decisions. Consulting journals, latest research and current national guidelines was a new learning pattern for many of the students which. The compilation of portfolio patient studies was seen to be the catalyst for this change.

Patient based learning

- *“Now I actually would tie it (learning) up to a patient, which I’ve never done before. I’ve always just studied topics, because I’ve had a list of spots and that’s it. But now I remember better, because I’ve actually seen a patient with such a condition, so now say I’m studying cardiac failure, I’d remember Mrs X and I’d always remember it, because I’d know exactly. Because I was part of her management, I’d know exactly what we did when, which medication to add, how Allied Workers helped us, simple things.”*

Impact of clinical work on learning

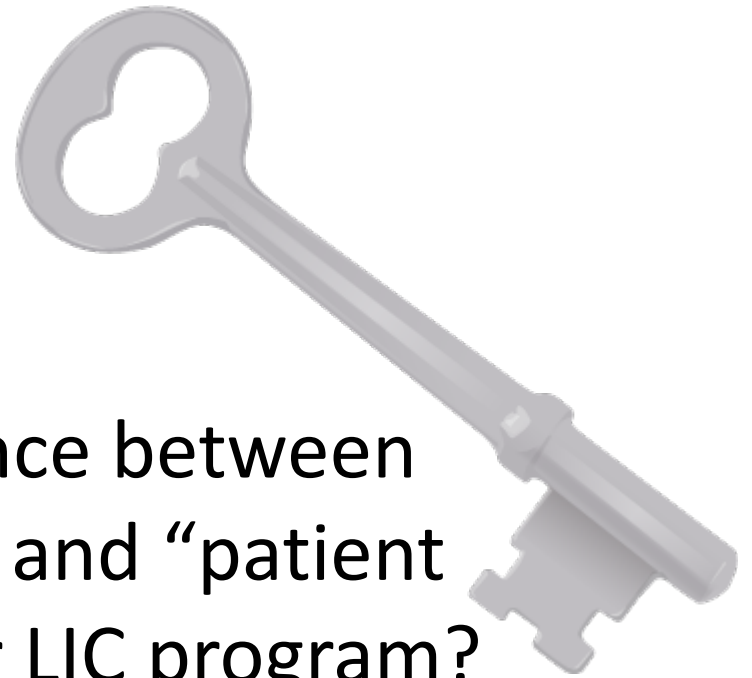
We're actually tired when we get home, and there's a lot expected from us because we're the only students and we're these doctor's first students, and they just expect us all to do well. So, time is a big issue for me in terms of studying

Impact of High Stakes Exams

- Final exams end of year, failing means not graduating
- Exams at teaching hospital
- “I feel confident being an intern next year, but dead scared of examinations”

Patient centered learning	“Traditional” learning
Point of care learning	Book learning
Patient portfolio Learning	Learning a condition e.g. diabetes
EBM learning triggered by patient	Learning for exam or MCQ
Work and study integrated	Work and study separated
Just in time learning	Just in case learning
Feel well prepared for internship	Very anxious about upcoming exam

Key questions



1. How do you find the balance between academic “book” learning and “patient centered” learning in your LIC program?
2. How do you facilitate patient centered learning in your programs?

Final Slide - Acknowledgements

- Funding from the U.S. President's Emergency Plan for AIDS Relief through HRSA via MEPI is gratefully acknowledged.