## **Brief Communication**

# Quality Assessment of Internal Residents in Tehran University of Medical Sciences (Hemmat Campus) in 2010-2011

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(Received: 19 Dec2012 Accepted: 5 Mar 2013)

## Abstract

Assessment is one of the major domains in medical education and the only means that makes the resident's capability observable during the residency training period. The data obtained from the quality assessment of residents in Tehran University of Medical Sciences (Hemmat campus) were reported in three categories, including of lack of assessment of clinical skills, assessment methods and assessment frequencies.

Keywords: Assessment, Medical residency, Internal medicine

Citation: Bigdeli Sh, Taghavinia M, Soltani Arabshahi K, Ahmadi S. Quality assessment of internal residents in Tehran University of Medical Sciences (Hemmat Campus) in 2010-2011. Edu R Med S. 2013; 2(1): 36-38.

## Introduction

ssessment is a significant factor in educational activities through which deficiencies and strengths of educational programs can be recognized and appropriate strategies can be implemented to help solve the problems of educational programs. Assessment seeks various objectives such as examining the success of the given program (1). The ultimate goal of training in the residency program is that the residents get proper clinical exposure progressively to acquire sufficient skills to take care of the patient with high standard in the given field and become teachers that can teach novice residents and students of general medicine (2); therefore, it is essential to develop the clinical and practical skills. Also, assessment as a tool to determine the resident's achievement of the required skills is considered crucial. Further, the current assessment challenges in the domain of medical education and the selection of appropriate assessment method and the consequent outcomes consistent with various specialties of medical sciences necessitate a special attention to this issue as one of the current priorities of medical education (3).

## **Methods**

This study was qualitative using analysis of themes. As the focus of the qualitative study is on the individuals' experience and viewpoints, from among the target groups that included the professors of internal department and internal residents, the fourth year residents who had approximately passed most of the training programs and their experience reflected the performance of their educational programs were chosen as the key individuals for interview based on purposive sampling method. Data were collected via semistructured interview which was done individually. The interview guidelines which included introduction and open-ended questions were provided to each participant. Six fourth-year internal residents (3 males and 3 females) from Tehran university of medical sciences (Hemmat campus) working in Hazrat e Rasoul

education and health center participated in the interview until data saturation. The ethical considerations of the research including permission to conduct the research, informed consent by participants and use of codes instead of the names to account for the confidentiality of the participants' information were completely taken into consideration.

Having gotten permission from the participants, the interviews were recorded and transcribed immediately. Then, the texts were separated into short meaningful units and each line was numbered. After memberchecking, the primary codes (main sentences or concepts) were extracted and classified eventually. To ensure the accuracy and consistency of the data, which is similar to validity and reliability in qualitative research, the written texts were subjected to peerchecking to compare the difference or similarity of the extracted notions with those extracted by the researcher.

## Results

Three categories including lack of assessment of clinical skills, assessment methods and assessment frequencies were obtained from the analysis of the data. Some statements reported by the participants of the study in each category are mentioned below:

#### Lack of assessment of clinical skills

51-2- There is really no written or practical assessment. 53-3- Procedures are not assessed because there is no training.

49-4- Procedures are not basically assessed but the residents are expected to know them ...

#### Assessment methods

94-1- There is a set of logbooks that are completed in the ward and the given intern or professor should complete them.

97-1- Our oral exam is not in fact carrying out the procedure. We may be shown images like endoscopy slides to recognize. These are the things that are performed once a year.

98-1- The written exam is routinely administered in all universities in June and leads to promotion to the next semester.

50-2- We only write the files numbers on top of these like a logbook and the attendants sign them eventually. 52-2- The promotion test in which we should do endoscopy practically ..... they merely show us an endoscopy image to analyze once a year ....

#### **Assessment frequencies**

97-1- Our oral exam ..... these are the things that are done once a year.

52-2- The promotion exam ..... once a year.

51-3- For the promotion exam, a set of theoretical questions are given annually.

56-6- The written test mostly consists of slides which is given once a year for promotion ..... the written test once .....

## **Discussion**

The findings of the present study indicated that the internal residents were assessed merely by log books that were completed in the wards. The oral and written exams, which are administered once a year, are mostly based on theoretical knowledge and are performed using slides and images that measure the knowledge of the residents. Rogers et al. (2001) obtained similar results in their study conducted in the Petersburg medical center (4).

Some believe that the exams that employ simulated patients are probably sufficient for training general medical students, but are not adequate for residents, and the resident's command in doing clinical skills is determined through clinical records and regular investigation (5). But based on the results of this study, the assessment methods and applied instruments for the assessment of internal residents did not measure the command of residents in their performance. This finding is similar to the result of the study conducted to assess the residents of physical medicine and rehabilitation in Washington in 2003 (6). To achieve the objectives of the internal resident program approved by the council of medical education and professionalism in 2008, the methods mentioned in the given program, including multiple choice questions, logbook analysis, direct observation procedural skills (DOPS), clinical practical test, case-based discussion, overall rating form, written exam with open-ended questions, 360-degree assessment, oral test and portfolio (7) or other appropriate methods can be used. For instance, by direct observation of the resident, the way he/she deals with the patient during rotation in different wards can be evaluated or the standardized environments can be used to assess the clinical skills, and written exam with multiple choice questions or portfolio can be used to recognize the resident's clinical reasoning. Nakhaee et al. in their study conducted in 2010 indicated that the 360-degree assessment possessed such qualities as ease of administration and acceptable reliability and validity for the assessment of the pivotal capabilities of the residents (8).

According to the findings of the present study, the internal residents were assessed once a year at the end

of the program via written and oral exams and no special assessment were carried out during the rotations. In the internal resident program approved by the secretariat, it is necessary to assess the written test once a year and other departments are responsible for determining the frequency of other exams. Based on the findings of the present study, the written exam, which is necessary once a year was administered, but other exams were not taken into consideration except logbook analysis. This indicates that the educational authorities do not pay heed to the instructions of internal resident program. These findings are compatible with those of the studies conducted abroad (9-11). Another noticeable issue observed in the findings of Lannie et al. was the time difference of each of the residents to be qualified for receiving diploma (9). It is suggested that the educational and planning authorities of the residents in various specialties account for this issue and conduct further studies to compare the performance of the residents in performing clinical skills in terms of time. The results of such studies would aid the authorities to better plan the standard assessment in order to achieve the objectives of resident training program.

## Conclusion

The medical professors and educational authorities should take some time into account to enhance their knowledge regarding the assessment of medical students, especially residents and make an attempt to improve the assessment of the residents of all specialties in the country by studying the assessment programs of the residents in credible universities and developed countries. Further studies are also recommended to examine the effectiveness of different assessment methods to accomplish the expected goals of the internal resident training program and other specialties to determine the most appropriate methods to promote the quality of resident training program.

## Acknowledgments

The authors would like to appreciate all the respected individuals in Rasoul Akram Hospital, Tehran University of Medical Sciences, department of medical education, and vice chancellor for research who assisted us in this study. The authors declare no conflicting interest.

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