

Evaluation of the Danish postgraduate medical specialist education with focus on work organisation

M Skipper¹, M Ipsen² and SB Noehr^{1,2}

1) Aalborg Hospital Science and Innovation Center (AHSIC), Aalborg, DK, 2) Aarhus University, Centre for Medical Education, Aarhus, DK

Corresponding author: skipper.mads@gmail.com

Background

In 2000, the Danish Specialist Commission Report (DSCR) resulted in a new educational and administrative structure in the Danish postgraduate medical education (PGME), which was implemented in 2004.

The report recommended several initiatives and focus areas on PGME – one was the specialist training in the clinical unit.

In 2011, the Danish National Board of Health has initiated an evaluation of the outcome and implementation of the recommendations.

Summary of work

Work organisation is an important part of specialist training in the clinical unit; therefore, we focus on the evaluation of how the work organisation influences the PGME through reviews of:

- The 3-hour meetings, 2002-2010, Aalborg Hospital.
- The Junior Doctors Education Inquiry, 2006, Danish Medical Association.
- The Danish Inspector Scheme Reports from 2006-2010.
- The Danish National Evaluation Instrument, "Evaluator.dk".
- A new questionnaire designed by the Danish National Board of Health for the evaluation process. (Data analysis not completed)

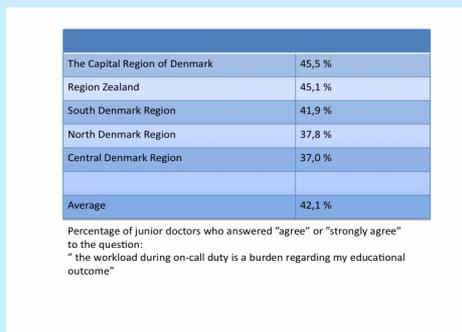
Results

The 3-hour meetings, 2002-2010, Aalborg Hospital

We used qualitative data from the 3-hour reports generated at Aalborg Hospital, Aarhus University Hospital. 3-hour reports are based on Grounded Theory and analysed inductively into themes. The reports included annual input from approx. 200 junior doctors training in 30 different departments as well as the department managements' responses.

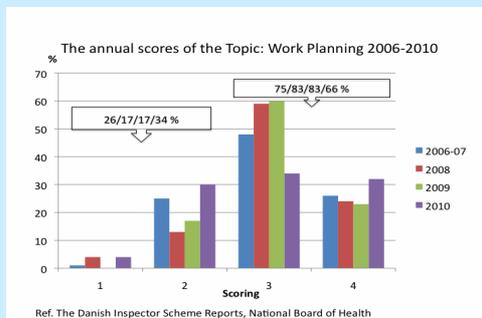
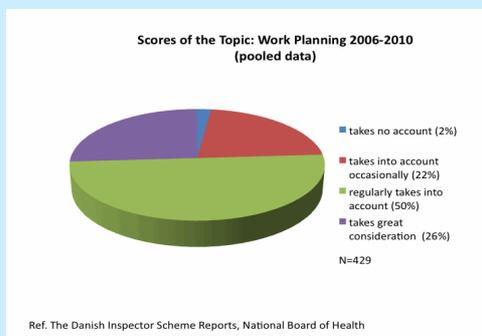
The preliminary conclusion is that all the issues which the Specialist Commission addressed in 2000 concerning PGME and work organisation are still found highly relevant to clinical education. These issues are recurring themes in the 3-hour reports through the years and are also part of the proposed initiatives and action plans. In addition, there is a need for operationalisation of the work organisation and rendering visible the educational efforts on department level.

The Junior Doctors Education Inquiry, 2006, Danish Medical Association



The Danish Inspector Scheme Reports from 2006-2010, National Board of Health

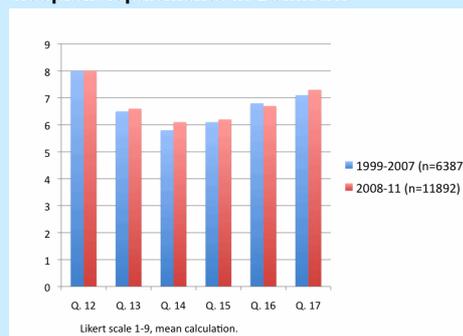
Departments responsible for PGME are visited at least every 4 years and evaluated on different topics, one being "Work Planning". The visit is carried out by at least two Inspectors (Consultants from same specialty, but different hospital), following a report with proposals for action.



The scores for the topic "Work Planning" shows an increase from 2006 to 2009, but a marked decrease in 2010.

Evaluator.dk

National evaluation of educational efforts in hospital departments in Denmark



The following questions addressing work organisation evaluated by junior doctors in training

- Q.12: How do you assess the degree of autonomy in clinical practice? (1: Low, 9: High, 0: Unanswered)
- Q.13: How do you assess the workload? (1: Low, 9: Extreme)
- Q.14: Was the organisation of work with reasonable regard to education? (1: Not at all, 9: Yes absolutely)
- Q.15: How was the on-call duty frequency relative to its educational value? (1: Too low, 9: too high)
- Q.16: How do you assess the educational value of work during on-call duty? (1: Low, 9: High)
- Q.17: How do you assess the training value of daytime work? (1: Low, 9: High)

There seems to be no visible change in how the junior doctors evaluate work organisation in PGME over years.

Summary of results

Although efforts have been made, we find that work organisation is a recurring theme in junior doctors evaluation of PGME and is still subject to improvement.

Conclusion

The Specialist Commission's recommendations regarding focus on the relationship between work organisation and the specialist training as part of clinical work are still highly relevant.

We recommend that hospital leaders and heads of departments to a higher extent include educational values in the administrative planning, and introduce work procedures that facilitate learning opportunities between junior doctors and senior medical staff.

Further research is needed on how work organisation with regard to PGME can be optimised, e.g. by using proper work planning tools.

Literature

Sundhedsministeriet. Fremtidens speciallæge. Betænkning fra Speciallægekommissionen. Betænkning nr. 1384 – maj 2000.

Ipsen, M & Nøhr, SB. The three-hour meeting: A socio-cultural approach to engage junior doctors in education. Med Teach 2009;31:933-7.

Information on the 3-hour meetings (in Danish): <http://www.aalborgsygehus.n.dk/For+afgfolk/KurserOgKompetenceUdvikling/LUF/3+timers+moeder/>