

# Leadership training module for medical residents in the Netherlands: Teaching legal aspects of health care and knowing how to deal with medical errors and negligence

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1) The knowledge of the legal aspects of health care and medical negligence/errors among medical residents is larger in the intervention group than for the control group 2) The flipped classroom model is effective as a teaching method in post...

<b>Ethische beoordeling</b>	Positief advies
<b>Status</b>	Werving nog niet gestart
<b>Type aandoening</b>	-
<b>Onderzoekstype</b>	Interventie onderzoek

## Samenvatting

### ID

NL-OMON22514

### Bron

Nationaal Trial Register

### Verkorte titel

CaMPMEN\_5

### Aandoening

Manager, Care management, Competency, Leadership, Legal, Negligence, Errors, Flipped classroom

### Ondersteuning

**Primaire sponsor:** MD, MHPE, PhD Jamiu O. Busari

**Overige ondersteuning:** MD, MHPE, PhD Jamiu O. Busari

# Onderzoeksproduct en/of interventie

## Uitkomstmaten

### Primaire uitkomstmaten

- 1) To assess the knowledge development on the topic of legal aspects of health care and medical negligence/errors amongst medical residents, and <br>
- 2) To assess the effectiveness of the flipped classroom model as a teaching method in the current setting.

## Toelichting onderzoek

### Achtergrond van het onderzoek

Background:

Postgraduate medical training programs are expected to prepare trainee physicians to practice adequately in the current health care environment. This mandate is reflected in the seven CANMEDs competencies namely: medical expert, collaborator, communicator, scholar, professional, manager and health advocate.

Besides the basic clinical knowledge and (problem-solving) skills that residents have to acquire during their training, the reformed postgraduate curricula for medical specialists spans other areas of medicine that are considered to be essential for their professional development. Some of these areas include health care systems, organization, population health, patient-physician communication, ethics, quality assurance and improvement and practice management. In the current postgraduate medical training, the implementation and further development of the competency as manager has received little attention when compared to the attention devoted to competencies as 'medical expert' and 'professional'. As good managerial skills are important for effective clinical practice, it is crucial that the development of the managerial competency during the (postgraduate) medical training is well supported and also reliably assessed.

Recent needs assessment studies from our earlier research on care management and leadership development in postgraduate medical training (CaMPMEN 1-3) identified ten themes necessary to develop these competencies in the postgraduate medical training. These ten items are, 'communication, knowledge of health care systems, time management, financial management, public health policies/health care ethics, legal aspects of health care and medical negligence/errors, managing group practices/specialist partnerships, career planning, negotiation skills and management'.

To our knowledge, teaching legal aspects of health care and medical negligence/errors is not a routine element of any Dutch postgraduate medical training. In addition, little structural attention is paid to these factors in both the undergraduate and graduate medical programme. Both residents and specialists have indicated there is a clear gap of knowledge. Therefore, we have chosen to implement a training module covering these two topics.

The design of the training module will make use of the 'flipped classroom' design. In more traditional forms of classroom instruction, information is relayed unidirectional from teacher to students. Preparation in the form of homework often includes reading textbook materials (i.e. a passive preparation process). In recent years, the flipped classroom model has gained popularity as a viable, effective teaching method. Within this model, attention is shifted away from a central teacher-oriented session to a student-oriented session. Key here is the fact that class time is devoted to 'higher-ordered learning activities, stimulating both discussions and critical thinking processes', because students have actively prepared classes ahead of time (1,2). Students typically receive only preparatory questions and exercises and are not presented with textbook reading materials.

This study therefore aims not only to assess the knowledge development on the topic of legal aspects of health care and medical negligence/errors, but also the effectiveness of the flipped classroom model as a teaching method.

(1) McLaughlin JE, Roth MT, Glatt DM, et al. The flipped classroom: A course redesign to foster learning and engagement in a health professions school. *Academic Medicine* 2014;89(2):236-243.

(2) Kerfoot BP, Conlin PR, Trivison T, et al. Web-based education in systems-based practice: A randomized trial. *JAMA Internal Medicine* 2007;167(4):361-366.

## **Doel van het onderzoek**

- 1) The knowledge of the legal aspects of health care and medical negligence/errors among medical residents is larger in the intervention group than for the control group
- 2) The flipped classroom model is effective as a teaching method in post graduate medical training

## **Onderzoeksopzet**

01-02-2016 to 06-03-2016: introductory session including pre-test and training module

07-03-2016 to 20-03-2016: in-depth interviews and post-test

21-03-2016 to 06-05-2016: data analyses

## **Onderzoeksproduct en/of interventie**

1. Introductory session:

a. Knowledge questionnaire (pre-test) demographic data collection for both intervention and control groups

b. Intervention group: receives preparatory questions/exercises (no reading materials) to be completed before the start of the second session (active learning)

Control group: receives a set of reading materials (passive learning)

2. Intervention group: training module on the topics 'legal aspects of health care' and 'medical negligence/errors', making use of the 'flipped classroom' model.

3. Two weeks after training module: knowledge questionnaire (post-test) for both intervention and control groups

4. Intervention groups: In-depth interviews to determine effectiveness of flipped classroom model in teaching this module

## **Contactpersonen**

### **Publiek**

[default]

The Netherlands

### **Wetenschappelijk**

[default]

The Netherlands

## **Deelname eisen**

## Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

Residents from clinical-related specialties from the Zuyderland hospital in the Netherlands from all years of residency are eligible for inclusion provided their term of residency does not expire before the end of data collection (at the time of participant selection). There is no age or gender discrimination.

## Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

There are no explicit exclusion criteria

## Onderzoeksopzet

### Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Parallel
Toewijzing:	Niet-gerandomiseerd
Blinding:	Open / niet geblindeerd
Controle:	Actieve controle groep

### Deelname

Nederland	
Status:	Werving nog niet gestart
(Verwachte) startdatum:	01-02-2015
Aantal proefpersonen:	30
Type:	Verwachte startdatum

## Ethische beoordeling

Positief advies	
Datum:	21-12-2015
Soort:	Eerste indiening

## Registraties

### Opgevolgd door onderstaande (mogelijk meer actuele) registratie

Geen registraties gevonden.

### Andere (mogelijk minder actuele) registraties in dit register

Geen registraties gevonden.

### In overige registers

Register	ID
NTR-new	NL5456
NTR-old	NTR5600
Ander register	: 15-N-200 METC Zuyderland

## Resultaten

### Samenvatting resultaten

1. "Medical residents perceptions of the need for management education in the postgraduate curriculum: a preliminary study" J.W.M. Brouns, L. Berkenbosch, F.D. Ploemen-Suijker, I.C. Heyligers, J.O. Busari, Int J Med Educ 2010, 1:76-82

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2. "Physicians as managers of health care delivery and the implications for postgraduate medical training: a literature review" J.O. Busari L. Berkenbosch, J.W.M. Brouns, Teaching and Learning in Medicine, 2011, 23(2): 186-96

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3. "How Dutch medical residents perceive their competency as manager in the revised postgraduate medical curriculum" L. Berkenbosch, J.W.M. Brouns, I.C. Heyligers, J.O. Busari, Postgraduate medical journal, 2011,Oct; 87(1032):680-7

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4. "How do medical Specialists' perceive their competency as physician-managers?" M. Bax, L. Berkenbosch, J.O. Busari. International Journal of Medical Education, 2011, 2:133-9

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5. "How Dutch medical specialists perceive the competencies and training needs of medical residents in health care management" L. Berkenbosch, M. Bax, I.C. Heyligers, A.M.M. Muijtjens, A.J.J.A. Scherpbier, J.O. Busari, Medical Teacher 2013, Apr;35(4):e1090-102. doi:10.3109/0142159X.2012.731544. Epub 2012 Nov 8. PubMed PMID: 23137237

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(6) A Pilot study of a practice management training module for medical residents". L Berkenbosch, AM Muijtjens, LJ Zimmermann, IC Heyligers, AJJA Scherpbier, J.O. Busari, BMC medical education, 2014 May 24;14(1):107. doi:10.1186/1472-6920-14-107.