Care Management in Postgraduate Medical Education in the Netherlands: Methods of assessment.

Gepubliceerd: 18-09-2012 Laatst bijgewerkt: 18-08-2022

To determine the current views of medical residents and educators on current assessment methods of care management competencies and potential assessment tools that can be used to improve care management evaluation. PHASE 3: 1. Literature...

Ethische beoordeling Positief advies

Status Werving nog niet gestart

Type aandoening -

Onderzoekstype Observationeel onderzoek, zonder invasieve metingen

Samenvatting

ID

NL-OMON24475

Bron

Nationaal Trial Register

Verkorte titel

CaMPMEN 3

Aandoening

Manager, health management, care management, competency, CANMEDS.

Ondersteuning

Primaire sponsor: Atrium Medical Center, Heerlen

Overige ondersteuning: Atrium Medical Center, Heerlen

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

Stage 1:

Stage 2:

Assessment of experts' perceptions of the current assessment tools and their perceptions of the conditions an instrument must meet to be a reliable, suitable instrument to measure management competence for residents.

Stage 3:

Obtain a good understanding of the experts' perceptions of the content and the quality of the current existing and current used instruments to measure management competence and their perceptions of the conditions an instrument must meet to be a reliable, suitable instrument to measure management competence for residents.

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. Unfortunately, the background of these competency descriptions is based on the premise that health care is provided within a managed (or controlled) care environment. Recently, it has become evident that the part of the reason why the implementation of the reformed Dutch postgraduate medical curricula of pediatrics and obstetrics and gynecology experienced some hindrance is related to (the complexity of) several unpredictable factors within the clinical learning environment. The hospital setting where clinical learning takes place is systematically subjected to continual change and situations that are difficult to predict and/or control.

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 a recent synthesis by Halpern et al., 10 medical domains regarded as important for the practice of medicine were identified, and were classified under the term 'care management'. This concept of care management provides an operational description of how physicians' managerial skills are translated into clinical responsibilities and at the same time, how they relate to the six other professional responsibilities. Hence, care management as described here incorporated the elements of the CANMEDS competency 'manager' as represented in the curriculum of the Dutch postgraduate medical training. In the current postgraduate medical training, the implementation and further development of the

competency as manager has not received a lot of attention as compared to the attention devoted to the competencies 'medical expert' and 'professional'. As good managerial skills are important for effective clinical practice, it is important that sufficient attention be given to developing this competency during the (postgraduate) medial training and also to how this competency can be reliably assessed and demonstrated as being attained in postgraduate medical trainees.

Doel van het onderzoek

To determine the current views of medical residents and educators on current assessment methods of care management competencies and potential assessment tools that can be used to improve care management evaluation.

PHASE 3:

- 1. Literature review to determine the content and quality of reliable measurement instruments (that can be) used to evaluate care management competencies in medical residents;
- 2. (Delphi study): Based on the findings of the literature review, evaluate experts' perceptions of the reliability and effectiveness of current assessment tools used to assess care management competencies. Also, determine the minimum requirements for an effective assessment strategy in evaluating care management competencies in residents;
- 3. (Qualitative research): Interview a focussed group of medical education experts' in order to identify the level of satisfaction with currently used assessment tools in care management. Also, determine which specific care management competencies are, in their perception, under-assessed and obtain expert recommendation on the best instruments to assess care management competencies.

Onderzoeksopzet

Stage 1: 10-09-2012 to 7-12-2012;

Stage 2: 28-09-2012 to 25-01-2012;

Stage 3: 26 October 2012.

Onderzoeksproduct en/of interventie

Phase 1: (NTR1925)

1. Questionnaire survey.

Phase 2: (NTR 2550)

- 1. Workshop on care management competency development;
- 2. Self-evaluation;
- 3. Assessment of changes in attitude or behaviour.

Phase 3:

- 1: Literature review;
- 2: Questionnaire survey;
- 3: Focussed Interviews.

Contactpersonen

Publiek

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Wetenschappelijk

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

- 1. Medical specialist in teaching hospitals;
- 2. Experts in the theory and methods of education;
- 3. Physician leaders/hospital CEO's.

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

- 1. Medical students:
- 2. Lack of experience in medical of educational fields.

Onderzoeksopzet

Opzet

Type: Observationeel onderzoek, zonder invasieve metingen

Onderzoeksmodel: Parallel

Toewijzing: N.v.t. / één studie arm

Blindering: Open / niet geblindeerd

Controle: N.v.t. / onbekend

Deelname

Nederland

Status: Werving nog niet gestart

(Verwachte) startdatum: 10-09-2012

Aantal proefpersonen: 40

Type: Verwachte startdatum

Ethische beoordeling

Positief advies

Datum: 18-09-2012

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 NL3463 NTR-old NTR3615

Ander register METC Atrium: 12N102

ISRCTN wordt niet meer aangevraagd.

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,
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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 https://doi.org/10.2012/j.com/
- 6. "Management and leadership development in health care and the challenges facing physician managers in clinical practice", J.O. Busari (2012) International journal of clinical leadership (in press).