



DIPLOMA IN FAMILY MEDICINE

KHYBER MEDICAL UNIVERSITY PESHAWAR

Introduction

Pakistan has a population of 193.2 million. Its vast majority of population resides in rural areas with health care mostly centred around major cities. According to recent figures from Pakistan Medical and Dental Council, Pakistan has 37,573 specialists.(1) The vast majority of doctors are registered without any postgraduate qualification, the figures for generalists (MBBS doctors) stands at 186980 (1)

Health care provision in Pakistan has been a challenge for many years, with successive governments experimenting with various ways of tackling the issue by building more tertiary care and transplant centres, little attention has been paid to primary care provisions. Almost all of the generalist doctor practicing in government run institutions, basic health units and rural health centres are without any appropriate post graduate qualifications.

Internationally and within the neighbouring countries of Pakistan there has been a concerted effort toward the implementation of Family Medicine to overcome the health care challenges. Up until very recently Pakistan has been focusing on meeting the WHO goals and its own challenges for Communicable (CDs) and Non-Communicable diseases (NCDs) through different programs by providing funding to different Non-Governmental organisations to help them tackle the issues of rising disease burden of these conditions. However internationally these conditions have been traditionally managed by qualified Family Physicians.(2) Examples of some of these efforts are the initiations taken by WHO-EMRO in providing a platform for an On-Line diploma course in Family Medicine for generalists' as well as the support for Family Medicine as a speciality which would no doubt be required for WHO sustainable development goals of 2030.(3)

To provide universal health coverage to all with quality, we need to train our generalists to move away from the traditionally unqualified FP practice to a more Family Physician approach. We need to train our generalists in the art of family medicine. Starting a program of post-graduation at a diploma level would be one such step in achieving an improvement in quality(4). This will also lead to better incentives for the clinicians as well as for the government to expand on the process of improving our fragmented primary health care system. Although a handful of courses are offered in some parts of Pakistan, none are available to doctors in Khyber Pakhtunkhwa at a university level.

By initiating a Diploma program in Family Medicine, we will improve the standard of care by helping in decreasing the pressures on our secondary and tertiary care centres from unwanted referrals, improve patient care and encourage health care based on the core values of Family medicine of patient centeredness, continuity of care, practicing holistically and with dignity with improvement in the quality of life which is based on prevention and cure.

Mission

- ✚ Our mission is to promote the Family Physician approach for Primary Health Care, targeting 3 Family Physicians per 10,000 by 2030. We're pioneering a Diploma in Family Medicine program at KMU and introducing Family Medicine clinics in pilot districts, inspiring other provinces to follow suit. We advocate for competency-based assessments for BHU Doctors and actively participate in the Prime Minister and KPK Health Insurance Programme. We envision Family Physicians as gatekeepers, delivering cost-effective, comprehensive care, and strive to enhance the healthcare system for the betterment of our nation.

Aims & Objectives

- ✚ To introduce Family Medicine approach in primary care in Pilot Districts of KPK as per the vision of WHO.
- ✚ To train cohort of Family Physicians who can work as family physicians in Pilot districts.

Course Objectives and Learning Outcomes

- ✚ To familiarize the participants with the principles and significance of family medicine in strengthening primary health care in a defined catchment area.
- ✚ To acquaint the participants with the role of family physician in providing essential health services to cure, prevent and promote health of a defined group of population at primary healthcare level.
- ✚ To describe the principles of health promotion and disease prevention as integrated components of the overall healthcare system.
- ✚ To illustrate the principles of documentation and medical records management in the context of family practice.
- ✚ To update the knowledge and skills of the participants about the management of common medical problems in primary care.

Course Description

This is 50-week course aims at orienting family physicians on the principles and elements of primary care services including the clinical management of common medical problems. Clinical placement is eight weeks, can be done during the course period depending on the clinical experience of the students. Participants are exposed to important concepts applied in primary care with an emphasis on family medicine approach as well as they get introduced to recent updates in the management of common medical problems. This enables them to provide a comprehensive, continuous and evidence-based patient-centered health care to individuals in their communities.

Participants have an orientation week followed by six modules. Assessment consists of two, end of course, MCQs and OSCE exams. Candidates who pass the final MCQ exam are entitled to attend the OSCE exam. Clinical placement will be for 8-10 weeks. The modules are divided into different weeks, whereby each week covers specific topics pertinent to primary health care.

The course follows blended learning format with both face to face and online learning method to deliver the course. This approach minimizes the face to face teaching and learning time to enable busy physicians to learn as much as possible in the comfort of their home environment. Physicians participate in online discussions on a weekly basis and do regular entries in their e-portfolio. They are also expected to complete assignments, formative MCQs, and quizzes that will be posted online throughout the course.

Course Schedule

The course starts with an orientation session in the first week followed by six modules over a period of 42 weeks and then eight weeks of clinical training followed by two exams, MCQs and an OSCE exam during the last four weeks.

The entire course is taught on the principles of adult learning with some aspects of pedagogy while also involving self-directed, online and face to face learning sessions. Participants are required to keep a learning record in the form of a portfolio. This includes all of the learning records throughout the program and can be continued for alumni of the university to help with ongoing learning.

Competencies Areas:

1. Clinical Competencies

- 1.1. Recognize and manage common conditions presenting to General Practice with a safe and cost-effective prescribing approach
- 1.2. Sufficient evidence-based knowledge of the illnesses and provide information for patients and their relatives in a straightforward and understanding manner
- 1.3. Promote health and disease prevention strategies through patient's and community education
- 1.4. Develop appropriate clinical diagnoses, rule out serious conditions and manage uncertainty
- 1.5. Appropriate procedural skills in primary care
- 1.6. Use Holistic approach and recognise the effect of psychological, socioeconomic and environmental factors on the health of individual patients and community
- 1.7. Dealing with ethical dilemmas as well as uncertainty and risk, professionally
- 1.8. Understanding the importance of holistic, person-centered and continuity of care to individuals and families
- 1.9. Make appropriate and timely referrals when needed
- 1.10. Proficient in dealing with complex medical problems including challenging clinical conditions, management of co-morbidity and poly-pharmacy.
- 1.11. Recognise cultural values and circumstances which may influence decisions by patients, their families, and health care professionals.

2. Consultation and communication

- 2.1. Gather concise information from patients, families, and other healthcare professionals involve in patient's care
- 2.2. Flexible response to the expectations of patients/family, respect their ideas and address their concerns
- 2.3. Make rapport, develop trust and maintain therapeutic relationships with patients and families
- 2.4. Perform patient-centered consultations with checking patient's understanding of their problem and offer shared management.
- 2.5. Effective telephone consultations with patients, third party and with other health care professionals with emphasis on confidentiality
- 2.6. Maintain accurate record of patient notes and maintain confidentiality
- 2.7. Write a concise and complete referral to secondary or tertiary care, using services appropriately

3. Working in a team

- 3.1. Work effectively with other professionals and multi-disciplinary team to ensure better patient care
- 3.2. Knows your limitation and call for help when needed
- 3.3. Demonstrate effective communication with secondary and tertiary care teams to provide comprehensive care to the patients. It includes sharing information and doing referrals
- 3.4. Learn and use skills of active listening, problem-solving, negotiation and conflict management to improve communication with colleagues and respect their views
- 3.5. Able to work independently and in team, also aware how and when to take the leading role
- 3.6. Aware of personal duties and obligations of providing patient care and anticipating any situations that may compromise patient care
- 3.7. Take appropriate action if come across any unprofessional or irresponsible behaviour of team members
- 3.8. Manage your own time efficiently, able to delegate tasks and offer support to colleagues who are struggling
- 3.9. Acknowledge the contributions and experience of other professionals and team members when coordinating patient's care
- 3.10. Improve working relationships with colleagues and maintain their trust
- 3.11. Promote team culture that is open, values-based and motivates others for their contributions

4. Leadership and Management

- 4.1. Identify your core management responsibilities as a leader when leading the primary care team
- 4.2. Contribute to staff development and training and participate in appraisal and recruitment
- 4.3. Understand employer and co-worker responsibilities about Health and safety
- 4.4. Understands the legal framework of medical practice and employment guidelines related to your role
- 4.5. Understand the organisation systems and able to coordinate with administration, monitoring teams and other services related to information governance
- 4.6. Promote organisational culture and create supportive environment at work
- 4.7. Influence your team by role modelling and adopt positive change
- 4.8. Organise and lead team meetings with own and wider team for service improvement
- 4.9. Show willingness to improve the quality of healthcare delivered to your patients and perform a simple quality improvement project
- 4.10. Demonstrate effective and sustainable utilisation of appropriate resources to deliver safe and effective care

- 4.11. Gather and analyse available information and data on practice performance and utilise this for organisational development
- 4.12. Response to patient feedback and health outcome data to improve health of the community
- 4.13. Review models of good practice and adopt them for the betterment of patients
- 4.14. Comply with organisational protocols, policies, and guidelines and contribute in development of new care pathways for improving the health of community
- 4.15. Recognise your responsibility for safeguarding vulnerable patients according to the local guidelines
- 4.16. Report and Reflect on any safety incidents and implement changes from the lessons learned

5. Medical Ethics and professionalism

- 5.1. Always have an ethical approach and provide care with integrity and respect for your patients and colleagues
- 5.2. Make sure your own attitudes, feelings, and beliefs (including cultural and religious) do not compromise patient care if it conflicts with your patients
- 5.3. Demonstrate a non-judgmental approach, treat others fairly and respect their rights and dignity
- 5.4. Act without discrimination, value diversity and promote equality of opportunity
- 5.5. Help to create environment where everyone is encouraged to participate and discourage culture of abuse, disrespect, and bullying
- 5.6. Provide care with compassion and kindness, relate to your patient as individual and not a subject with the disease.
- 5.7. Recognise and address any communication or culture issues which may compromise patients' care due to lack of understanding
- 5.8. Aware of any legal problems related to informed consent and confidentiality especially if family or any third party involved in patient's care
- 5.9. Maintain and share concise, accurate and unbiased record
- 5.10. Be honest about your own abilities, strengths, weaknesses, and priorities
- 5.11. Admit and apologise openly and honestly for any mistakes and learn from it through reflective learning and inform patients about complaint procedure
- 5.12. Fulfil your duty of candour to patients and carers, and respond to any complaints in a time efficient and appropriate way

6. Teaching and Training

- 6.1. Maintain performance by engaging in self-directed learning and continuous professional development
- 6.2. Review your clinical practice by critical reflection and addressing learning needs
- 6.3. Involve in targeted study and self-assessment, identify new learning needs and evaluate your process of learning
- 6.4. Keep log of your learning activities for self-reflection and improvement of practice
- 6.5. Apply the principles of lifelong learning and quality improvement throughout your career
- 6.6. Support and contribute to the education and professional development of students, colleagues and team members for the improvement of health services
- 6.7. Participate in the evaluation and personal development of colleagues as appropriate to your role and experience and provide constructive feedback

7. Research, Clinical Governance and Audits

- 7.1. Understands the concepts of clinical governance and audits
- 7.2. Participate in audit project, quality improvement, and research activity
- 7.3. Able to access and evaluate the scientific evidence for clinical performance standards and guidelines
- 7.4. Understand role of research and its application in clinical settings for service development

Course Structure

Training component	
Classes/Theory	weekly
Clinical Rotation	<ul style="list-style-type: none"> • Medicine & Allied • Surgery & Allied • Emergency Medicine • Gynae & Obs • Family Medicine & Primary care
Orientation and feedback	2 weeks
Average hours of reading per week	~ 10
Total credits	CME credits 16
Total Duration	50 weeks

Eligibility criteria for Dip FM (KMU)

1. M.B.B.S from a P.M.D.C recognized medical college
2. Valid P.M.D.C certificate
3. One year House Job in a P.M.D.C recognized training site

Outline of Modules

Module 1: Principles of Family Medicine & Introduction to Public Health

Module 2: Non-Communicable and common chronic diseases

Module 3: Common Presentations and Emergencies in General Practice

Module 4: Common Complaints and Care of Elderly

Module 5: Women's and Men's Health

Module 6: Maternal & Child Health

Details of Modules Structure

Module 1: Principles of Family Medicine

Learning Outcomes

By the end of this module, a learner will be able to:

- + Understand the principles and basics of Family Medicine
- + Demonstrate the understanding of person centred and holistic care through empathic and effective communication skills
- + Act as advocate for the patient and appropriately refer to next level of care as and when needed.
- + Involve patients in the management of their diseases and conditions
- + Construct a diagnosis based on focused examination skills.
- + Interpret common laboratory investigations such as complete blood count, liver function tests, renal function tests, urinalysis, HbA1C.
- + Interpret ECG and identify abnormal findings.

Specifications of Module 1: Principles of Family Medicine & Introduction to Public Health

Week	Topic	Resource	Assessments	Skills/FTF
Week1: Family Medicine Core Concept	<ul style="list-style-type: none"> - Introduction to Family Medicine - Practice of Family Medicine - Documentation and Medical Records - Evidence- Based Medicine - Professionalism - Values based Medicine 	Online Moodle Reflective log entries Presentations	Information Governance, Audit CBD, COT, SJT Online discussion E-portfolio, Reflective log entries	Ethical Practice Using EMR and paper record Completing Family Registration folders
Week 2: Family Medicine Core Concepts II	<ul style="list-style-type: none"> - Communication Skills - Basic Epidemiology - Biostatistics - International Health Care systems - Disease Early warning system (DEWS) 	Online Moodle Videos Consultation Models Notes/Books Presentations Reflective log entries	Video Consultations (Assignment, AUB) CBD, COT, miniCEX, SJT Online discussion E-portfolio, Reflective log entries	Consultation Models Simulated Consultation Video Consultations Conflict and team management questionnaires
Week 3: Health Promotion and Disease Prevention	<ul style="list-style-type: none"> - Periodic Health Examination- Children - Periodic Health Examination- Adults - CVD Risk Assessment & Prevention 	Online Moodle Presentation & Videos Scores/Tools Reflective/learning log entries	Examination Videos COT and mini-CeX Videos Assignments Reflective log entries	Practice sessions Clinical Skills lab Videos
Week 4: Diverse Health Issues	<ul style="list-style-type: none"> - ECG interpretation - ECGs not to miss - Irrational Use of Medications 	Online Moodle Reading : ECG book Reading: Articles Presentations	Videos CBDs, Mini-CeX PSA Assignments Reflective log entries	Practical sessions in clinical Lab During FTF
Week 5: Diagnostic Skills	<ul style="list-style-type: none"> - Interpretation of common lab investigation - CXR and other Xrays 	Lab test online Common xray interpretation books Presentations	Videos Online discussion in groups Reflective log entries COT, CeX	Practical skills FTF discussion Spot test
Week 6: Assignments	<ul style="list-style-type: none"> - Examination skills - Signs in various conditions 	MCQs Pictures/spot diagnosis Reflective log entries	MCQs, Quiz Peer discussions Written Assignments	Case Scenarios

Module 2: Non-Communicable and common chronic diseases

Learning Outcomes:

- + Diagnose and manage common chronic diseases such as hypertension, diabetes, Ischaemic heart diseases, CCF, hepatitis etc.
- + Understand the diagnostic criteria and management guidelines of prevalent chronic conditions especially non-communicable diseases.
- + Evaluate his/her role and limitations in interdisciplinary team work to manage chronic diseases
- + Safely manage common conditions seen in the community setting in a holistic manner
- + Effectively use other health services for the management of common conditions prevailing in the community
- + Understand his/her limitations and personal competence when dealing with these conditions and refer appropriately when needed
- + Advocate individual and community health.
- + Prescribe cost effectively and avoid un-necessary prescribing
- + Promote health and well-being by applying health promotion and disease prevention strategies appropriately

Specifications of Module 2: Non-Communicable and common chronic diseases

Week	Topic	Resource	Assessments	Skills/FTF
Week 1: Non-Communicable disease	- Hypertension - Diabetes Mellitus Type - Dyslipidaemia	Presentations and video lectures Diabetic foot examination video NICE / SIGN Guidelines	CBD, COT, Mini-CEX Quiz, MCQs Case scenarios Online E-portfolio Reflective entries CBD, miniCEX Peer discussion	Diabetic foot examination Case Scenarios Diabetes Screening
Week 2: Non-Communicable disease	- Obesity - Asthma - Chronic Obstructive Pulmonary Disease	Presentations and video lectures Examination videos. NICE / SIGN /BTS Guidelines	CBD, COT, Mini-CEX Quiz, MCQs Case scenarios Online E-portfolio Reflective entries Peer discussion	Case Scenarios Spirometry, Peak Flow Videos & FTF. DESMOND/XPERT Course
Week 3: NCD	Co-morbidities, IHD, CCF, CVA, Annual Reviews, Secondary Prevention	Guidelines presentations	CBD, COT, Mini-CEX Quiz, MCQs Case scenarios Online E-portfolio Reflective entries Peer discussion	Practice cases with Simulated patients. Prescribing Skills/Advice
Week 4: NCD	Hepatitis and Chronic Liver Diseases	Guidelines Video and live lectures Face to Face presentations	CBD, COT, Mini-CEX Quiz, MCQs Case scenarios Online E-portfolio Reflective entries Peer discussion	Practice cases with Simulated patients. Prescribing Skills/Advice
Week 5: Assignments	Management options and case Scenario#	Assignments Clinical Audits Case discussions	MCQs, Quiz Peer discussions Written Assignments Assess CBDs	Guidelines Co-morbidities Management Secondary Prevention

Module 3: Common Presentations and Emergencies in General Practice

Learning Outcomes

- ✚ Identify common red-flags in mental illness, MSK, Common dermatological conditions, respiratory, including renal and GI problem
- ✚ To be able to deal with common emergencies and provide appropriate initial management
- ✚ Differentiate and manage depression and anxiety in primary care
- ✚ Diagnose psychotic symptoms and signs of self-harm and refer promptly
- ✚ To safely manage these common conditions seen in the community setting in a holistic manner
- ✚ To be aware of the allied health services and provisions for these conditions in the community
- ✚ To be aware of limitations and personal competence when dealing with these conditions
- ✚ To be aware of area specific illness
- ✚ To prescribe cost effectively and avoid un-necessary prescribing
- ✚ To work on increasing community and patient awareness by promoting awareness about self-limiting illness.

Specifications of Module 3: Common Presentations and emergencies in Family Practice

Week	Topic	Resource	Assessment	Skills / FTF
Week 1	Common Mental Health problems Anxiety, depression, Dementia and psychosis Psychotherapy/Counselling Acute Mental Health presentations Red Flags	Online module DSH Guidelines Face to face presentations Patient information leaflet	Case scenarios Online E-portfolio Reflective entries CBD, miniCEX Peer discussion	PHQ9/GAD/ MMSE/6CIT etc tests Screening CBT
Week 2	Common MSK Back pains, Osteoarthritis, frozen shoulder, Rheumatoid Arthritis, MSK Examinations, Pre-Hospital Trauma. Acute MSK presentations Red Flags	Online Moodle Guidelines Face to face presentations Patient information leaflet Videos	Case scenarios Online E-portfolio Reflective entries CBD, miniCEX Peer discussion	MSK Examinations, Pre-Hospital Trauma
Week 3	Common Skin Problems Acne, childhood Exanthem, common skin conditions (Eczema, Dermatitis, Psoriasis, fungal infections etc.) Acute Dermatology issues Red Flags	Online Moodle Guidelines Face to face presentations Patient information leaflet Pictures from Derm.Net	Case scenarios Online E-portfolio Reflective entries CBD, miniCEX Peer discussion	Spot diagnosis/picture slides Practice cases with Simulated patients,
Week 4	Common Respiratory problems. URTI, Community Acquired Pneumonia, TB Occupational Respiratory diseases. Acute Respiratory presentations & Red Flags	Online Moodle Guidelines Face to face presentations Patient information leaflet	Case scenarios Online E-portfolio Reflective entries CBD, miniCEX Peer discussion	CURB 65 score Vaccinations Respiratory Examination / abnormal findings
Week 5	Common Renal/Urinary problems Haematuria, UTIs, bladder problems, Renal colic Acute Renal presentations & Red Flags	Online Moodle Guidelines Face to face presentations Patient information leaflet	Case scenarios Online E-portfolio Reflective entries CBD, miniCEX Peer discussion Videos	USS and other Urology Investigations Interpretations Urological Examinations/Abnormal findings
Week 6	Common GI problems Constipation, Diarrhoea, Dyspepsia IBS and IBD. Acute GI presentations & Red flags	Online Moodle NICE/SIGN Guidelines Face to face presentations Patient information leaflet	Case scenarios Online E-portfolio Reflective entries CBD, miniCEX Peer discussion	Practice cases with Simulated patients, Examination / abnormal findings

Module 4: Common Complaints and Care of Elderly

Learning Outcomes:

- ✚ To manage common complaints, patient presents with in primary care.
- ✚ To manage conditions that may present early and in an undifferentiated way.
- ✚ To provide holistic and patient centre care to elderly population.
- ✚ To adopt evidence based clinical information management: selectively gather and interpret information from history-taking, physical examination, and investigations and apply it to an appropriate management plan in collaboration with the patient.
- ✚ To use effectively and efficiently diagnostic and therapeutic interventions as needed.
- ✚ To refer to other health professionals and specialists as needed.
- ✚ To promote health and well-being by applying health promotion and disease prevention strategies appropriately.
- ✚ To be mindful of issues with patient's capacity and consent.

Specifications of Module 4: Common Complaints and Care of Elderly

Week	Topics	Resource	Assessment	Skills/FTF
Week 1	Common complaints Chest pains Abdominal pains Poisoning Adult BLS	Online Moodle Face to face presentations Patient information leaflet CDC & WHO guidelines	Case scenarios Online E-portfolio Reflective entries CBD, miniCEX Peer discussion	Practice cases with Simulated patients, Examination / abnormal findings BLS ABCD assessment
Week 2	Common Complaints Red Eye, Eye lid problems, cataract, glaucoma. Headaches Dizziness	Online Moodle Face to face presentations BASH Guidelines Patient information leaflet	Case scenarios Online E-portfolio Reflective entries CBD, miniCEX Peer discussion	Practice cases with Simulated patients, Examination / abnormal findings
Week 3	Common Complaints Sleep problems (insomnia, OSA, Snoring) ENT problems (Rhinitis, Sinusitis, Ear wax, age related deafness, Hoarse voice) Thyroid problems	Online Moodle Guidelines Face to face presentations Patient information leaflet	Case scenarios Online E-portfolio Reflective entries CBD, miniCEX Peer discussion	Practice cases with Simulated patients, Examination / abnormal findings
Week 4	Care of Elderly Falls Assessments Poly Pharmacy Palliative care Pain and symptom control Psychosocial Support	Face to face presentations Online Moodle Palliative care Guidelines Patient information leaflet	Case scenarios Online E-portfolio Reflective entries CBD, miniCEX Peer discussion	Falls , OT/Physio Assessment Prescribing Skills
Week 5	Miscellaneous topics Vaccinations Cost-effective prescribing Rational use of anti-biotics How to write a prescription	Face to face presentations Online Moodle Guidelines BNF, eMC , pharma guide, online access Patient information leaflet	Case scenarios Online E-portfolio Reflective entries CBD, miniCEX, DOPS Peer discussion	Prescribing Skills DOPS

Module 5: Women's and Men's Health

Learning Outcomes:

- ✚ To demonstrate professionalism in dealing with patients presenting with gender specific problems.
- ✚ To respect patient privacy and autonomy.
- ✚ To demonstrate compassion and respect to others.
- ✚ To demonstrate sensitivity to diverse population with no limitation to gender, age, culture, religion, and disability.
- ✚ To refer to other health professionals and specialists as needed.
- ✚ To promote health and well-being by applying health promotion and disease prevention strategies appropriately.
- ✚ To treat patients in a non-judgmental way be mindful of patient confidentiality

Specifications of Module 5: Women's and Men's Health

Week	Topics	Resource	Assessment	Skills/FTF
Week 1	Women's Health 1 Menstrual disorders Menopause Breast lumps Contraception	Online moodle Guidelines Face to face presentations Patient information leaflet	Case scenarios Online E-portfolio Reflective entries CBD, miniCEX Peer discussion	Practice cases with Simulated patients, Examination / abnormal findings IUCD, Implant
Week 2	Women's Health 2 LUTS Vaginal Discharge Vaginitis STDs / HIV etc Infertility Cervical and Breast screening	Online moodle Guidelines Face to face presentations Patient information leaflet	Case scenarios Online E-portfolio Reflective entries CBD, miniCEX Peer discussion	Practice cases with Simulated patients, Examination / abnormal findings
Week 3	Men's Health LUTS Prostate problems Haematuria Erectile Dysfunction Pre-Marital Screening	Online moodle Guidelines Face to face presentations Patient information leaflet	Case scenarios Online E-portfolio Reflective entries CBD, miniCEX Peer discussion	Practice cases with Simulated patients, Examination / abnormal findings

Module 6: Maternal & Child Health

Learning Outcomes:

- ✚ To be able to offer pre-conception advice and care for the mother.
- ✚ To be able to Diagnose and manage common antenatal and postnatal problems.
- ✚ To be able to do baby/child health checks and aware of common conditions presenting in early childhood
- ✚ Demonstrate and apply knowledge and skills of maternal and child immunization.
- ✚ To refer to other health professionals and specialists as needed.
- ✚ To promote health and well-being by applying health promotion and disease prevention strategies appropriately
- ✚ To be aware of area specific needs in terms of vaccinations and local disease burden.

Specifications of Module 6: Maternal & Child Health

Week	Topics	Resource	Assessment	Skills/FTF
Week 1	Mother Health Pre conception Antenatal Post-natal lactation	Face to face presentations Online Moodle Guidelines Patient information leaflet	Case scenarios Online E-portfolio Reflective entries CBD, miniCEX Peer discussion	Practice cases with Simulated patients, Examination / abnormal findings
Week 2	Child Health Newborn & 8 weeks check Futher Developmental checks Vaccination / immunisation Red book	Face to face presentations Online Moodle Guidelines Patient information leaflet	Case scenarios Online E-portfolio Reflective entries CBD, miniCEX Peer discussion	Practice cases with Simulated patients, Examination / abnormal findings
Week 3	Neonatal Golden minute & Golden Hour course Neonatal BLS	Work Shop Videos Guidelines	Case scenarios MCQs. OSCE	Neonatal resusciation

Assessment

The aim of assessment is to assess both the clinical competence and professionalism during the course. It includes both formative and summative assessments as detailed below. Attendance and participation in the face to face sessions and online discussions are also considered as part of the formative assessment. The training component of the course is not just for developing clinical competence but can also be used to complete the compulsory WPBA.

Assessment	Formative	Summative
Knowledge	MCQ's, OSCE	MCQ's, OSCE
Skills	WPBA (DOPS, mini-CEX), OSCE	OSCE, PSA
Behavior	SJT, WPBA (E-portfolio, COT, CBD)	OSCE,

WPBA (Work place based assessments)

CBD	Minimum One – Two per module
Mini CEX	One per system
COT	Total 4
DOPS	Total 10
Audits	As agreed

The portfolio consists of

- 1) Log Books for individual clinical Rotations
- 2) A Personal development plan
- 3) Self-reflection based on discussions with named supervisor
- 4) A log of cases seen in primary or secondary care
- 5) A log of face to face days and activities attended
- 6) Evidence of miniCex/DOPs and SEAs
- 7) Evidence and results of Assessments, both formative and summative
- 8) Evidence of self-directed learning
- 9) Evidence of personal reading from mentioned resources
- 10) Final assessment
- 11) Signing off from the diploma program
- 12) Invitation to use the portfolio for continued learning

Behaviours observed in a DOPS

1. Demonstrates understanding of indications, relevant anatomy, technique of procedure
2. Obtains informed consent
3. Demonstrates appropriate preparation pre-procedure
4. Appropriate analgesia or safe sedation
5. Technical ability
6. Aseptic technique (if appropriate)
7. Seeks help where appropriate
8. Post procedure management
9. Communication skills
10. Consideration of patient/professionalism
11. Overall ability to perform procedure

Skills Required

Clinical Examination Skills	Resources	Learning	Assessment
Abdominal including Rectal	KMU Clinical Skills lab / HMC / RHC	Video/FTF Learning by practice	DOPS / miniCEX
Respiratory	KMU Clinical Skills lab / HMC / RHC	FTF / Video Learning by practice	DOPS / miniCEX
Cardiology	KMU Clinical Skills lab / HMC / RHC	FTF / Video Learning by practice	DOPS / miniCEX
Gynaecological / PV for female students	KMU Clinical Skills lab / HMC / RHC	FTF / Video Learning by practice	DOPS / miniCEX

Procedural Skills	Resources	Learning	Assessment
<u>General</u> Blood sugar by glucometer Giving intravenous, intramuscular, subcutaneous or intradermal injections Inserting an IV cannula Measurement of height and weight	KMU Clinical Skills lab / HMC / RHC	Video/FTF Learning by practice	DOPS/COT
<u>Cardiovascular</u> Basic life support Performing and interpreting an electrocardiogram Use of Sphygmomanometer & Stethoscope	KMU Clinical Skills lab / HMC / RHC	FTF / Video Learning by practice	DOPS/COT
<u>Respiratory</u> Administering oxygen Use of a nebuliser & peak flow meter Instructions for use of Powder inhalers, Metered dose Inhalers, Spacer	KMU Clinical Skills lab / HMC / RHC	FTF / Video Learning by practice	DOPS/COT

<u>Eye</u> Visual acuity, colour tests and visual fields testing	KMU Clinical Skills lab / HMC / RHC	FTF / Video Learning by practice	DOPS
<u>Gastrointestinal</u> Digital rectal examination & Proctoscopy NG intubation	KMU Clinical Skills lab / HMC / RHC	FTF / Video Learning by practice	DOPS
<u>Obstetrics and Gynaecology</u> Collecting endocervical swabs & Pap smear Insertion and removal of IUCD Urine pregnancy test	KMU Clinical Skills lab / HMC / RHC	FTF / Video Learning by practice	DOPS
<u>Urinary</u> Passing a urinary catheter Performing and interpreting Urine dipstick	KMU Clinical Skills lab / HMC / RHC	FTF / Video Learning by practice	DOPS
<u>ENT</u> Assessment of hearing loss including use of Tuning forks & Otoscope Proper use of tongue depressor & nasal speculum	KMU Clinical Skills lab / HMC / RHC	FTF / Video Learning by practice	DOPS
<u>Surgical procedures</u> Incision and drainage of abscess Local anaesthesia Suturing Wound debridement and dressing	KMU Clinical Skills lab / HMC / RHC	FTF / Video Learning by practice	DOPS
<u>Musculoskeletal</u> Application of plaster of Paris Application of slings and supports Use of tendon hammer	KMU Clinical Skills lab / HMC / RHC	FTF / Video Learning by practice	DOPS

Communication/Consultation	Resources	Learning	Assessment
Making Rapport	KMU Clinical Skills lab / HMC / RHC	FTF / Video Learning by practice	COT/CBD Direct/indirect Supervision
Exploring ICE	KMU Clinical Skills lab / HMC / RHC	FTF / Video Learning by practice	COT/CBD Direct/indirect Supervision
Checking patient's understanding	KMU Clinical Skills lab / HMC / RHC	FTF / Video Learning by practice	COT/CBD Direct/indirect Supervision
Shared Decision Making	KMU Clinical Skills lab / HMC / RHC	FTF / Video Learning by practice	COT/CBD Direct/indirect Supervision

Professionalism	Resources	Learning	Assessment
Understanding of Ethical Principles	FTF lectures. Case scenarios	FTF / Video Reading/online	SJT / CBD
Values based medicine	FTF lectures. Case scenarios	FTF / Video Reading/online	SJT / CBD
Palliative care	FTF lectures. Case scenarios	FTF / Video Reading/online	SJT / CBD
Breaking bad news	FTF lectures. Case scenarios	FTF / Video Learning by practice Reading/online	SJT / CBD

Abbreviations

APHCP: Association of Primary Health Care Professionals

AUB: American University of Beirut

CBD: Case Based Discussion

Cex: Clinical Exercise

COT: Consultation Observation Tool

CURB: Consciousness, Urea, respiration, blood pressure

DOPS: Directly Observation of Procedural Skills

FM: Family Medicine

FP: Family Physicians

FTF: Face to face

IUCD: Intra Uterine Contraceptive Device

KMU: Khyber Medical University

MiniCex: Mini Clinical Exercise

MMSE: Mini Mental State Examination

6 CIT: six items cognitive impairment test

MSK: Musculoskeletal

OSCE: Objective Structured Clinical Examination

PHC: Primary Health Care

PHQ: Patient Health Questionnaire

PSA: Prescribing Skills Assessment

SEA: Significant Event Analysis

SJT: Situational Judgement Test

URTI: Upper Respiratory Tract Infection

WPBA: Work Place Based Assessment

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