

# Effective Block Coordination in a Hybrid Curriculum

Al Moamary MS

College of Medicine, King Saud bin Abdulaziz University for Health Sciences, Riyadh, Kingdom of Saudi Arabia

## Abstract:

**Introduction:** Block coordination is one of the most important activities in a PBL curriculum. A lot of research has been carried out on the effectiveness of tutor, whereas little is known about the effectiveness of a block coordinator. The College of Medicine, King Saud bin Abdulaziz University for Health Sciences, is a newly established college adopting a strong PBL and web-based curriculum. **Objective:** The to identify the characteristics of a qualified coordinator, define the roles of the coordinator, and highlight the activities that should be conducted before, during, and after the block. **Methods:** Focus group discussions were conducted with block coordinators in addition to direct observation and records review were used. results Six qualifications were identified for the block coordinator, such as participation in block planning group and familiarity with academic regulations. Thirteen roles were identified for the block coordinator, for instance monitoring the progress of activities in the block. Finally, nineteen activities were identified for the block coordinator before, during and after the block, such as conducting assessment items review meeting. **Results:** Roles, responsibilities, activities before, during and after the block were identified. **Conclusion:** Focus group discussion and direct observations facilitated the delineation of guidelines for Block Coordinators in accordance with their own preferences and recommendations. The methodology inherently led to an increased acceptability for the guidelines with the stakeholders. Further study is recommended to evaluate the effectiveness of these guidelines

Submitted on January 2<sup>nd</sup>, 2008. Accepted and presented on March 2008

**Correspondence:** Dr. Mohamed Al Moamary, P.O. Box 84252, Riyadh 11671, Saudi Arabia. Email: almoamary@yahoo.com

## Introduction

Block Coordination is one of the most crucial and important activities in a Hybrid Curriculum, which employs a mix of teaching learning methodologies

like Lectures, Problem-Based Learning (PBL) and Skills-based sessions. The role of a Block Coordinator is not only limited to organizing the block but it extends to support all activities that ensure the realization of block objectives including assessment, block evaluation and day to day block implementation. The College of Medicine, King Saud bin Abdulaziz University for Health Sciences is a newly established undergraduate medical school which has adopted an innovative hybrid curriculum. Based on our three years experience and following the implementation of 14 Blocks for three batches we are able to answer the following important questions that make an effective Block Coordinator. Who is qualified to be a Block Coordinator? What are the roles of a Block Coordinator?, What are the responsibilities of the Block Coordinator before the Block?, What are the responsibilities of the Block Coordinator during the Block?, What are the responsibilities of the Block Coordinator after the Block?

## Methods

This study was conducted in a newly established College of Medicine at King Saud bin Abdulaziz University for Health Sciences, Riyadh, Saudi Arabia. It covered two years pre-clinical nine system-based blocks. The study covered Three academic years from September 2004 – August 2007. The Curriculum is a hybrid curriculum adopted from University of Sydney on 2004. A Focus Group discussion was conducted with Block Coordinators that included 24 Coordinators. Data was also collected through direct observations and review of records. The data generated was qualitatively analyzed

## Results

### A- Qualifications of a Block Coordinator:

12. Participated in basic Medical Education Courses including Introduction to PBL, and Introduction to Assessment.
13. Commitment to the position of Block Coordinator and should be available for all required activities, which is anticipated to be a minimum of 16 hours a week.
14. Participated as a Block Co-Coordinator or a member of the Block Planning Group.
15. Familiarity with bylaws, policies, procedures and regulations.
16. Participated in advanced medical education courses. A participation in intensive short courses such as Maastricht summer course is an asset.

17. Participation as a tutor in previous courses or Blocks is an added advantage.

#### **B- Roles of a Block Coordinator**

1. Ensure the administration of the Policies, Procedures, and Regulations of the College.
2. Ensure the availability of the required educational resources for the Block including Block book, online materials, evaluation and assessment forms, laboratory materials and other educational resources in collaboration with the respective departments and committees.
3. Negotiate and allocate faculty for Block educational activities in consultation with respective departments.
4. Organize orientation sessions for faculty, staff and students to the Block.
5. Coordinate educational activities in a manner that facilitates maximum effectiveness and utilization of faculty, staff and other resources.
6. Prepare the Block book in accordance with the prescribed format after discussion with the Block planning group and formal approval by the Curriculum Committee.
7. Monitor the progress of activities in the Block according to the schedule delineated by the Block planning group.
8. Advise and liaise with Academic Affairs to avail financial support for the running of activities in the Block including remuneration of faculty and staff.
9. Resolve operational problems associated with implementation and management of the Block.
10. Collect and collate exam items with related faculty to ensure a reliable and valid assessment of student's learning outcomes.
11. Develop and monitor efforts to continually improve the Block and suggest any recommendations to the Curriculum Committee and Medical Education Department in this regard.
12. Identify students with learning difficulties, counsel them on academic matters and foster their progress in the Block in collaboration with their academic supervisors and Medical Education Department.
13. Prepare an end of Block report according to the prescribed format in collaboration with Program and Faculty Evaluation Committee.

#### **C- Responsibilities of the Block Coordinator before the Block**

1. Development, in collaboration with the Block Planning Group, a comprehensive Block book

that includes Block objectives, resource people, weekly schedule.

2. Contact the selected faculty for lectures, skills and PBL sessions at least three months prior to the commencement of the Block.
3. Ensure that Academic and Student Affairs make the initial contact with faculty.
4. Prepare a blueprint for assessment according to the Block Objectives and based on the blueprint initiate the contact with faculty requesting items for examinations according to the format given by the assessment unit.
5. Meet with the Coordinators of the longitudinal themes at least two months prior to the commencement of the Block. This meeting will assist in the planning and distribution of responsibilities for each theme.
6. Meet with the Assessment Coordinator and members of the OSCE/OSPE Working Group two weeks prior to the commencement of the Block. This meeting should result in the formation of an assessment blueprint, delineation of assessment procedures, and division of related roles and duties.
7. Meet with the PBL Tutors and a member of Medical Education Department two weeks prior to the commencement of the Block. This meeting will orient the new Tutors to the steps of PBL facilitation and to the assessment and evaluation forms.
8. Meet with faculty responsible for delivering lecturers and conducting skill sessions, to orient them on block activities, and the process of writing high quality assessment items according to the manuals, effective lecturing, and appropriate clinical skills teaching.

#### **D- Responsibilities of the Block Coordinator during the Block**

1. Meet each week with the PBL tutors and faculty from Medical Education Department. This meeting will discuss issues arising in previous PBL sessions. Secondly, the tutors will discuss the next coming PBL in order to finalize the essential learning topics for the PBL and the timing for release of additional triggers, investigation reports and other information from patient data.
2. Review mid-term evaluations in consultation with Medical Education Department and the respective Associate Deans.
3. Collect and collate assessment items from the faculty and make them available for item review meetings. Call for item review meetings in order to review MCQs, OSCEs and OSPEs with the contributing faculty,

- Assessment Coordinator and a representative from Assessment Unit two weeks prior to the conduct of the respective exam.
4. Assemble final version of midterm / final exam paper using at least 10% and not more than 50% from Hong King Consortium bank at-least two days before the exam.
  5. Assign invigilators and staff members for the proper conduct of examination and ensure the availability of all required resources including manikin and simulated patients in collaboration with assessment committee.
  6. Analyze the psychometric output of the midterm examination with the Assessment Coordinator and take required actions.
  7. Provide qualitative feedback to students and take appropriate actions whenever required.

#### **E- Responsibilities of the Block Coordinator after the Block**

1. Collect and collate exam items with related faculty to ensure a reliable and valid assessment of student's learning outcomes.
2. Analyze the psychometric output of the final examination with the Assessment Coordinator and take required actions.
3. Prepare the final grade according to Grade sheet 1 and 2 in collaboration with the Assessment Coordinator.
4. Write a Block Assessment Report in accordance with the guidelines provided by Medical Education Department.
5. Write an End of Block Evaluation Report in accordance with the guidelines provided by Medical Education. The report should discuss the overall functioning of the Block and should provide recommendations for improvement.

#### **Conclusion**

Focus group discussion and direct observations facilitated the delineation of guidelines for Block Coordinators in accordance with their own preferences and recommendations. The methodology inherently led to an increased acceptability for the guidelines with the stakeholders. Further study is recommended to evaluate the effectiveness of these guidelines

#### **References:**

- Bligh J. Identifying the core curriculum: the Liverpool approach. *Med Teach* 1995;17:383-390
- Diemers AD, Dolmans DH, Van Santen M, Van Luijk SJ, Janssen-Noordman AM, Scherpbier AJ. Students' perceptions of early patient encounters in a PBL curriculum: a first evaluation of the Maastricht experience. *Med Teach* 2007;29:135-42
- Diemers AD, Dolmans DH, Verwijnen MG, Heineman E, Scherpbier AJ. Students' opinions about the effects of preclinical patient contacts on their learning. *Adv Health Sci Educ Theory Pract* 2007; ahead of print
- Irby D, Wilkerson L. Educational innovations in academic medicine and environmental trends. *J Gen Inter Med* 2003;18:370-376
- Lloyd-Jones, Ellershaw, Wilkinson, Bligh. The use of multidisciplinary consensus groups in the planning phase of an integrated problem-based curriculum. *Med Educa* 1998;32,278-282
- Steinert Y, Mann K, Centeno A, Dolmans D, Spencer J, Gelula M, Prideaux D. A systematic review of faculty development initiatives designed to improve teaching effectiveness in medical education. *Med Teach* 2006;28:497-526
- Wiers R, Van de Wiel M, Sá H; Mamede S, Tomaz J, Schmidt H. *Med Teach* 2002;24:45-51