



Role of distance-learning modules and contact sessions in developing knowledge and skills of junior doctors for practicing effectively in rural hospitals in India

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Letters to the editor

Role of distance-learning modules and contact sessions in developing knowledge and skills of junior doctors for practicing effectively in rural hospitals in India

Dear Sir

Distance learning, supported with supervised clinical work, has been successful in helping doctors located in geographically remote areas to practice effectively (Sanders 2007). Christian Medical College (CMC), Vellore, in India designed the Fellowship in Secondary Hospital Medicine (FSHM), a one-year blended distance education program, to support its graduates working in secondary hospitals, which are typically small hospitals in rural areas. The FSHM was designed to provide educational opportunities for these junior doctors working in geographically remote areas through 15 paper-based distance-learning modules focused on providing the academic resources to develop knowledge to practice in rural hospitals; three contact sessions at CMC focused on developing necessary skills; project work focused on improving local health services; and networking between peers and with faculty to provide academic and social support and reduce potential isolation. The purpose of this letter is to report an evaluation of the role of distance-learning modules and contact sessions in helping junior doctors develop the knowledge and skills to practice effectively in rural hospitals in India. The role of project work and networking is important and will be addressed in another publication.

A mixed method evaluation was done using written surveys with students and faculty and a focus group discussion with students. Evidence for validity was gathered for the written survey. Criteria for trustworthiness, including triangulation, member check, thick description and audit trail, were applied for the qualitative data analysis (Barzansky et al. 1985).

The vast majority of students (81%) and faculty (80%) rated the distance-learning modules as Very Good/Excellent in helping students develop the knowledge to practice in

secondary hospitals. Major strengths of the distance-learning modules, identified through qualitative data analysis, were Instructional Design; Useful Content; and Applicability in Secondary Hospitals. Recommendations for improvement were: Add New Modules and Make Modules Available Online.

The vast majority of students (88%) and faculty (87%) rated the contact sessions Good/Very Good in helping students to apply what they have learned in secondary hospitals. Major strengths of contact sessions identified were: Content; Networking and Support; Clarification of Doubts Regarding Patient Management Issues in Secondary Hospital Setting; and Skills Training. A recommendation for improvement was to Continue and Enhance Networking.

Carefully prepared distance-learning modules, supported with contact sessions, should be considered for enabling junior doctors to practice effectively in rural hospitals.

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Undergraduate student assessors in a formative OSCE station

Dear Sir

The nature of marking and rating in OSCEs is such that any examiner, who has been trained, can assess a station. Bucknall et al. (2007) have shown that peer assessment has a high