

Faculty Guide

COLLEGE OF MEDICINE

Prince Sattam Bin Abdulaziz University



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ABOUT THE COLLEGE

Prince Sattam Bin Abdulaziz University was founded based on a telegraph of approval no. 2030 dated 23/03/1428 Hijri from the Custodian of the Two Holy Mosques, Head of the Ministerial Council and the head of the Higher Education Council, regarding creating new colleges and universities around the kingdom. Prince Sattam bin Abdulaziz university adopted establishment of a College of Medicine in Al Kharj region, in which the study in the college started in the academic year 1429\1430 H (2008).

Many batches have graduated from the college. Most of the graduates have joined eminent centers of residency programs, and many of them have been recruited in academic positions in the college. The college recruits excellent faculty members who have PhD or equivalent, and also have diverse experiences in their specialties. The college, represented in its faculty members, students, and administration, seeks to provide a unique educational experience for students through continuous innovation in its curriculum, and conduction of medical research that contributes to the improvement of the health sector.

Since curricula should be dynamic and sensitive to the societal changes and demands, as well as the global orientation and insights, the college launched a new competency-based, integrated, hybrid PBL curriculum. These innovative educational strategies have proven to equip graduates with competencies that help them provide better health-care services after graduation.





Vision

Excellence in medical education, scientific research and active community partnership.



Mission

Provide distinguished medical education and innovative medical research that serves the community through optimal use of human and technologic resources, outstanding medical educational programs, effective clinical training, continuous medical education, and constructive partnerships with the community and stakeholders.



Values

- Quality and perfection
- Responsibility
- Integrity and empathy
- Trust and mutual respect
- Teamwork
- Professionalism



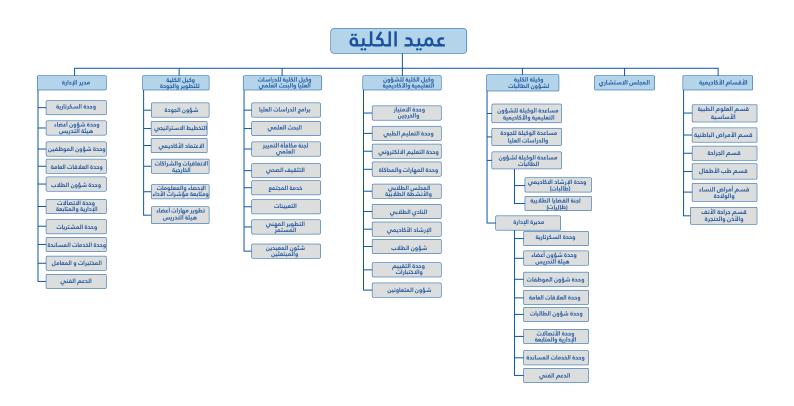


College of Medicine at Prince Sattam University, aims to:

- 1. Contribute to enhancing the academic position and ranking of Prince Sattam Bin Abdulaziz University on the local and international levels.
- 2. Develop the students' and graduates' skills of self-learning and to encourage creative scientific research and continuous medical education.
- 3. Develop a stimulating medical learning and teaching environment according to international standards.
- 4. Establish active scientific research collaborations with local and international institutions of medical education.
- 5. Attract outstanding academic and teaching staff and provide the necessary resources.
- 6. Maximize and optimize the use of state-of-the-art medical technologies.
- 7. Develop applied programs for postgraduate education.
- 8. Contribute to community advancement and development.



ORGANOGRAM

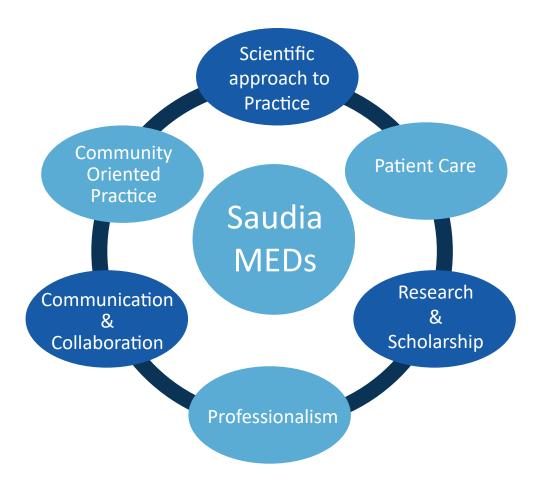




BACHELOR OF MEDICINE AND SURGERY

Program Description

The college is currently implementing an innovative program that adopts educational strategies which emphasize on enhancing the role of the student in the learning process and promoting the attributes of medical graduates, which allows the graduates to compete at the national and international levels. The attributes of the medical graduates are described in many competency frameworks. The Saudi Medical Education Directives (Saudi Meds) is one of these competency frameworks that helps medical colleges build their program and benchmark its outcomes. Innovation in education globally and nationally and accreditation requirements and their emphasis on the educational strategies that promote student centeredness and integration led to the establishment of this program that adopts many main innovative strategies, they are outcomes-based education, integration, problem-based learning and student-centeredness



Saudi Meds Framework (2017)





• Educational Strategies

The educational strategies in the program are outcomes-based education, integration, problem-based learning and self-directed learning.

1. Outcomes-based education

Medical schools need to prepare young doctors to practise in an increasingly complex healthcare scene with changing patient and public expectations and increasing demands from employing authorities. Outcome-based education offers a powerful and appealing way of reforming and managing medical education. The emphasis is on the product; what sort of doctor will be produced, rather than on the educational process. In outcome-based education the educational outcomes are clearly specified. Most curricula worldwide are shifting from an input and process-oriented focus to product (outcomes) focused teaching and learning methods.

2. Integration

In an integrated curriculum, the barriers are broken between disciplines allowing disciplines to merge in a unified body (modules) revolving around a certain theme. This type of integration is called horizontal integration and allows students to later recall information in an organized and relevant manner. Another goal of integration is to break down barriers between the basic and clinical sciences in what is called "vertical integration". Integration should promote retention of knowledge and acquisition of skills through repetitive and progressive development of concepts and their applications.

3. Hybrid PBL

Problem-Based Learning (PBL) is an educational strategy that promotes learning through dealing with clinical problems. In the standard PBL curriculum, the clinical problem always comes first, and all educational activities are related to the problem. In our curriculum, PBL tutorial sessions are included among other educational methods to deliver the curriculum. The problem represents a prototype of conditions tackled during the week.

4. Self-directed learning

The students in the program are encouraged to formulate their own learning needs during the course of studies and decide on the learning resources to consult. Students are also encouraged to reflect on their learning experience and develop learning plans.

PROGRAM LEARNING OUTCOMES

By the completion of the MBBS program, medical students should be able to:

1.0 Knowledge and understanding

- **1.1** Recognize the typical structures, functions and developmental characteristics of the different systems of the human body.
- **1.2** Identify the disease conditions that affect the different systems of the human body and describe their diagnosis and treatment.
- **1.3** Outline the levels of care; primary, secondary, and tertiary and describe their roles in the national health system.
- **1.4** Define the emergency and critical care situations and outline the recent developments in their management.
- **1.5** Describe the methodology and ethics of medical practice and research.

2.0 Skills

- **2.1** Take and present full medical history and perform clinical examination of patients suffering from different disease conditions.
- **2.2** Develop pharmacologic and non-pharmacologic management plans for the diseases based on the clinical examination and diagnostic procedures.
- **2.3** Use clinical examination techniques and equipment to assist in management of patients with various emergencies.
- **2.4** Plan for disease prevention to solve public health challenges.
- **2.5** Apply clinical reasoning, decision-making, practical and problem solving skills to diagnose and manage different disease conditions.
- **2.6** Practice reasoning and information technology skills to interpret data for achieving educational, clinical, research goals and lifelong learning.
- 2.7 Communicate effectively and provide health education for patients and the community for the prevention and management of different disease conditions.
- **2.8** Conduct applied medical research projects using quantitative methods and digital technology to process and interpret data while applying ethical procedures.

3.0 Values

- **3.1** Show professional attitudes and apply Islamic, legal, and ethical principles in the medical career.
- **3.2** Demonstrate academic and professional development and lifelong learning to manage tasks and professional challenges autonomously.
- **3.3** Work collaboratively with colleagues and respect the principles of group dynamics and use diverse methods to communicate effectively with patients, and the community.
- **3.4** Show active involvement in community development.



STUDY PLAN

Years and Stages of Study

The program (Bachelor of Medicine and Surgery) extends over six academic years; the first year (phase I) is the preparatory year and is managed through a unified program by the University for the Health Sciences Colleges. The following two years (phase II) (years 2 and 3) represent the basic sciences years and are dedicated for basic sciences courses taught in an integrated manner, i.e., an organ system-based curriculum, thus achieving horizontal integration, in addition to introduction of clinical skills in a simulated setting during these years, thus achieving vertical integration. The following three years (phase III) are dedicated to the clinical sciences and include courses that enable students to practice medicine upon graduation in a competent and professional manner.

Credit hours

The curriculum includes 200 credit hours distributed as following:

- 1. 30 credit hours: First Preparatory Year
- 2. 8 credit hours: University requirements (during the second and third years)
- 3. 63 credit hours: Basic Sciences Years (second and third year)
- 4. 99 credit hours: Clinical Years (fourth, fifth and sixth year)



Curriculum Map

College of Medicine, Prince Sattam Bin Abdulaziz University

timeline	Week 1 Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Week 16	Week 17	Week 18	Week 19	Week 20	Week 21	Week 22	Week 23	Week 24	Week 25	Week 26	Week 27	West 28	Week 29	Wook 30	Week 31	Week 32
Year 2	Foundations of Integrated Medi- (cal Sciences (MED34101) credits 8 Medical terminology (MED341112) 1 credit Expository Writing (ARAB103) 2 credits Islam and Construction of Society (IC102) 2 credits										Cardiovascular System Respiratory System Endocrine System (MED34103) (MED34104) (MED34105) credits 7 credits 4 credits 5 Economic System in Islam (IC103) 2 credits																				
Year 3	Digestive system Urinary system Reproductive system (MED34106) (MED34107) (MED34108) credits 7 credits 4 credits 5 (Fundamentals of Islamic Political System (IC104 credits 2										m	Neurological System and Special Senses (MED34109) credits 10											Blood and Immune System _(MED34110) credits 4								
Year 4		Internal medicine I Ophthalmology (MED34301) (MED34204) 3 credits Ophthalmology (MED34204) 3 credits									(N		pedics Surgery I 34206) (MED34201) its 4 credits 8										Psychiatry (MED34303) credits 3								
	Forensic Medicine, Toxicology and biomedical ethics MED34111) 2 credits)												MED34205) 3 credits)																		
Pediatrics (MED34401) 12 credits										Gynecology and obstetrics (MED34501) 12 credits																					
Year 5	Dermatology (MED34304) 2 credits										Community medicine (MED34403) 1 credit Radiology (MED34305) 2 credits																				
	Family medicine (MED34402) 4 credits										Research methodology (MED34405) 2 credits																				
Year 6	Surgery II (MED34202) credits 14 Credits									ical (ED34	Care (MED34302) credits 14											Jaw July de la									

ROLES OF MEDICAL TEACHER



(The eight roles of the medical teacher (Harden et al., 2018

Medical educators are change agents. Their work is essential in promoting the health of the community and the reform of health professions education. Individuals usually assume that the professional competence is the only factor that affects the responsibilities of the medical educators, and they usually disregard the preparation for the roles of the teacher. The following are the different roles that the medical teacher can assume in health professions education institutions:

1. Information Provider & Coach:

- Your responsibilities as an information provider are to provide up-to-date information to students and inform them about the core knowledge that they should master. It is also important that you provide them with non-core information that may increase their motivation to learn. Demonstration of the interrelationships between items of information is also one of your main roles in this context, as well as helping the student to move up the pyramid of information from easy to complex.
- Your responsibilities as a curator of information are to be specific on what the students should study and distinguish between essential references and additional references, so that the students can manage their time efficiently. You should also be able to limit what is required to the time available to students and indicate how the work will be assessed.
- Your responsibilities as an information coach are to help your students to make sense of and apply knowledge, as well as prompt students to develop their questioning skills. Among the responsibilities also is helping students self-directed strategies and identifying evidence-based resources to answer questions.

2. Facilitator, clinical supervisor & mentor:

- As a teacher, you can facilitate learning by making the learning outcomes clear and guiding the student towards achieving them. Engaging the learner is another responsibility, as well as providing feedback, encouraging active learning, and making learning relevant.
- As a clinical supervisor, your responsibilities are to plan for clinical teaching and ensuring time for training on essential clinical skills. Another important responsibility is to ensure that self-reflection and feedback are integral in the clinical teaching sessions, and to allocate time to monitor the progress of students and plan with them for improvement. Ensuring that patient safety is considered crucial to the role of the clinical supervisor.
- As a mentor, your responsibilities are to be a:
- Teacher
- Adviser
- Role model
- Advocate
- Coach
- Agent
- Confidant
- Sponsor

3. Curriculum developer and implementer:

• As a teacher, your curriculum responsibilities include being familiar with the curriculum, including the vision and mission of the college, the different courses of the curriculum, the educational strategies, and the teaching and learning methods. The responsibilities also include planning and implementing course that are consistent with the policy of the college, and also evaluating these courses and plan for improvement.





4. Assessor and diagnostician:

• As a teacher, your assessment responsibilities include being familiar with the policy of the college as concerns assessment timings, formats, systems, consequences, etc. Your responsibilities also include planning and implementing assessment, provide feedback to students on their assessment results, and analyze your assessment as to guarantee its validity and reliability.

5. Role Model:

• As a teacher, your responsibilities as a role model include influencing students and demonstrating the characteristics of a competent and professional doctor, as well as guiding students through career choice. The teacher as a role model also helps students develop their professional identity and supports the learning environment as to make it motivating for students' learning.

6. Manager & Leader:

• As a teacher, your responsibilities as a teacher-leader/teacher-manager include having a vision of what is to be achieved and influencing others to realize the vision. Also, it is important for the medical teacher to be able to communicate effectively, resolve conflict, and negotiate. Resilience is another quality that should be present in the medical teacher as a manger and a leader.

7. Scholar & Researcher:

• As a teacher, your responsibilities as a scholar & researcher include reflecting on your teaching practices and make evidence-based decisions as regards the curriculum, the teaching and learning, and the assessment methods. Your role also includes planning for innovation of medical education and implementing educational research that contributes to the knowledge base in medical education. Evaluation of teaching practices and peer review are also aspects of the responsibilities of the medical teacher as a scholar and researcher.

8. Professional:

• As a teacher, your responsibilities as a professional include complying to the standards of behavior and teacher roles and responsibilities. As a professional, you are also required to acquire the teaching competencies necessary to perform effectively and update these competencies and reflect on them. Self-and peer assessment are integral parts of being a professional medical teacher, as well as maintaining wellbeing and avoiding stress and burnout.

ROLES OF THE FACULTY MEMBERS IN THE COLLEGE OF MEDICINE, PRINCE SATTAM BIN ABDULAZIZ UNIVERSITY

In the basic sciences years

1. Lecturer

Interactive lectures

Interactive lectures are held in the different disciplines aiming at promoting retention and retrieval of information for students. The use of multimedia and applied examples is encouraged during the lectures to keep the students attentive and help with transfer of learning. Discussions, questioning, answering questions, and providing feedback should be among the priorities of lecturers.

To conduct effective interactive lectures, you should plan for it. Careful structuring of the lecture is required, with the statement of its objectives at the beginning, and applying frequent pauses and review of the topic. Presentation skills should be rehearsed before the lecture and you should give time and care for evaluating your lecture, so that you can plan for improvement in the future.

• Interdisciplinary lectures (IDLs)

To promote an integrated approach to learning; learning across different disciplines; interdisciplinary lectures are conducted by in the same setting with more than one lecturer. The planning of interdisciplinary lectures should be a teamwork effort. IDLs help promote retention of information.



2. Facilitator in small group discussions

• Problem-Based Learning (PBL) Tutorials

In the context of the Hybrid-PBL Curriculum, PBL tutorial sessions are held during phase II of the curriculum (years 2 and 3). Each educational problem is discussed in two sessions. In the first PBL tutorial session (brainstorming session), a new case scenario is introduced to students for discussion and the tutor's role is to facilitate the discussions and not to deliver direct information. At the end of this session, the students generate learning needs (objectives). The second PBL tutorial is for students' presentation of the results of their self-study and further discussion.

The seven jumps in PBL

- Step 1: clarify unfamiliar terms
- Step 2: define the problem(s)
- Step 3: brainsform possible hypotheses or explanations
- Step 4: arrange explanations into a tentative solution
- Step 5: define learning objectives
- Step 6: information gathering
- Step 7: share the results of information gathering to solve the problem



The main roles of the facilitator in PBL sessions are:

- Promoting discussion
- Avoiding delivery of knowledge
- Asking non-directive questions
- Setting group norms
- Managing group dynamics
- Being a role model
- Helping students identify their learning objectives and resources

• Integrated Clinical Case Discussions (ICCDs)/flipped classrooms

Clinical cases act as trigger to students' thinking and learning, as well as a trigger to explanation of the topic by the tutor. The case includes questions to be attempted by the students and explained by the tutor. The use of clinical cases allows for both horizontal and vertical integration, where disciplines of the basic sciences are taught together in one session, with few clinical interpretations. Integrated clinical cases help students develop clinical reasoning skills.

ICCDs follow the flipped classroom method, where students receive the study materials and the triggers some time before the session and come to class prepared for discussion. The role of the tutor in this type of discussions is to promote enquiry learning and make sure that the students covered the study materials fully.



3. Subject Matter Expert in Seminars

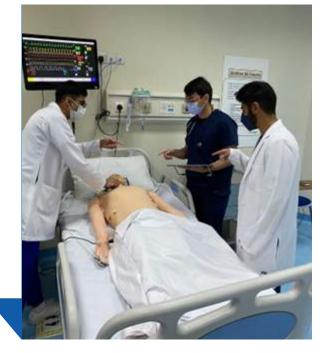
An interdisciplinary seminar is held in a large group session to allow students to ask questions related to their studies throughout the week, especially in relation the clinical case scenarios they encountered. A panel of subject matter experts from different specialties attends to answer the students' questions. During seminars, students apply presentation skills and reflect on their learning.

4. Practical laboratory instructor

Practical sessions take place in the laboratories, where students develop practical skills in the different disciplines.

5. Instructor in Clinical Skills and Simulation Training

The different clinical skills are taught throughout the curriculum and represent a considerable part of the learning activities in all modules of the curriculum in phases II and III.



6. Supervisor in Community-Based learning activities

In phase II, students visit the different community health facilities that offer services relevant to their studies. The visits have pre-set objectives that should be covered during the visit. The supervisor makes sure that these objectives are met and coordinate the activities with the community health facilities.



7. Student assessor

In the basic sciences years, medical teachers from basic sciences disciplines construct test items for written and practical exams. These test items are compiled by the course coordinator and revised by the assessment unit and then administered to students.

The formats of test items used in the college are:

- Multiple Choice Questions (MCQs)
- Short Answer Questions (SAQs)
- Modified Essay Questions (MEQs)
- Objective Structured Practical Exams (OSPEs)
- Clinical Skills Assessment (CSA)



In the clinical years

1. Lecturer

Interactive lectures are held in the different disciplines aiming at promoting retention and retrieval of information for students. The use of multimedia and applied examples is encouraged during the lectures to keep the students attentive and help with transfer of learning. Discussions, questioning, answering questions, and providing feedback are among the priorities of lecturers.

2. Team-Based Learning tutor

Team-based learning is another form of flipped classrooms that is part of the learning activities in the clinical years. The student receives learning materials before the TBL session, they should come to class prepared. During class time, the students work in teams to respond to application exercised given by the instructor. The success of the TBL session depends on individual work from each student, teamwork, and peer evaluation.

3. Facilitator for case-based discussions

Case based discussion is a learning method that helps promote the problem solving, clinical reasoning and critical thinking skills. During the clinical years, case-based discussions are applied in almost all courses to fulfil these aims.

4. Clinical teacher

Bedside teaching takes place in clinical modules in the university hospital and other hospitals or health services provision outlets contracted to offer training to the students. During clinical teaching, the teachers focus on helping the students acquire and master the different practical and professional skills. The process is guided by the module learning outcomes and each teaching session includes feedback from the teacher on the performance of the students, as well reflection by students.

Tips to promote effective bedside teaching:

- 1) Preparation: revise your own skills, the learners' needs and the curriculum.
- 2) <u>Planning:</u> construct a road map of the activities and objectives of the session.
- 3) Orientation: orientate the learners to your plans for the session.
- 4) <u>Introduction:</u> introduce everyone present, including the patient!



- 5) <u>Interaction:</u> role-model a doctor—patient interaction.
- 6) Observation: watch how the students are proceeding.
- 7) **Instruction:** provide instruction.
- 8) **Summary:** tell the students what they have been taught.
- 9) **Debriefing:** answer questions and provide clarifications.
- 10) Feedback: give positive and constructive feedback to students.
- 11) <u>Reflection:</u> evaluate from your perspective what went well and what was less successful.
- 12) <u>Preparation:</u> prepare for your next bedside teaching session.

The clinical teaching in the college also includes simulation sessions held in the clinical skills and simulation laboratory.



5. Mentor for portfolios

Portfolios is an instructional method based on enabling the students to formulate their own learning needs, learning plans to achieve those needs, and reflect on the experience. In clinical modules, each student constructs a portfolio that includes their learning needs, the clinical cases they encountered (history taking, physical examination, etc.), and the supervisor's assessment of the student's performance. Each group of students has a mentor who helps them develop their portfolios. Portfolios are used both for instruction and for assessment purposes.



6. Student assessor

In the clinical years, each department has an assessment committee that constructs test items. These test items are compiled by the course coordinator and revised by the assessment unit and then administered to students. The formats of test items used in the college are:

- Multiple Choice Questions (MCQs)
- Short Answer Questions (SAQs)
- Modified Essay Questions (MEQs)
- Objective structured clinical exams (OSCEs)
- Portfolios



UNITS SUPPORTING THE ROLES OF THE FACULTY MEMBERS

The program of the college of is supported by highly qualified units that help to fulfill its vision, mission, and objectives, and to ensure high quality teaching, learning and assessment that are applied in the curriculum. These units include the following:

Medical Education unit

The medical education unit is the core of teaching & learning as its main roles are to guide, train, monitor faculty and student performance. In addition, the MEU is involved in curriculum planning, implementation & evaluation.

Functions of the Medical Education Unit

- 1. Performing periodic program evaluation of the curriculum.
- 2. Developing guidelines/manuals for different types of teaching and learning activities in the college to help faculty members implement those teaching practices effectively.
- 3. Conducting faculty development activities; conferences, workshops, seminars, webinars, etc., to train the faculty members on the different roles of the medical faculty members.
- 4. Conducting interactive activities for students, such as workshops and seminars, to familiarize them with the teaching and learning methods in the curriculum and help them to learn effectively.
- 5. Monitoring of the different teaching and learning activities in the curriculum.
- 6. Planning, in collaboration with the curriculum committee, for periodic curriculum reform.
- 7. Planning, in collaboration with the e-learning unit, for using technology in curriculum management and implementation.
- 8. Collaborate in the field of medical education with other medical education bodies (departments and units) on the national, regional and international levels.
- 9. Scholarship in the field of medical education.

Assessment & Evaluation unit

This unit has an important role throughout the whole exam process, starting with setting assessment policies, regulations and guidelines passing through the required faculty training for exam planning and preparation, and ending by evaluating exam quality.

Functions of Assessment and Evaluation unit

- 1. Perform quality control of written, practical and clinical exams in the college at the different phases of student assessment; pre-administration, and post-administration.
- 2. Develop regulations/policies of all assessments in the college, based on the curriculum guidelines and documents, as far as the quality of assessment is concerned.
- 3. Develop guidelines/manuals for different types of student assessment in the college to help faculty members implement effective assessments.
- 4. Conduct faculty development activities; workshops, seminars, webinars, etc., to train the faculty members on the development and management assessment.
- 5. Collaborate with the different departments of the college to build an item bank for all types of assessments.
- 6. Supervise the work of exam committees/student assessors in the different departments of the college.
- 7. Plan for using technology enhanced assessments (TEAs) in the college.
- 8. Collaborate in the field of assessment with other assessment bodies on the national, regional and international levels.

• E - learning unit

The Faculty of Medicine pays high attention to the application and use of e-learning and distance learning programs. In this context, the Dean of the Faculty of Medicine established the e-learning unit at the College on February 1, 2018. The e-learning provides training and support for faculty members as concerns making their courses electronically managed and applying blended learning in some aspects of the courses.

Continuing professional medical education unit

The continuing professional medical education unit aims at enhancing health care knowledge, skills and competencies among faculty members in order to raise health care efficiency. The unit organizes different CPME activities throughout the year that are meeting the needs of trainees and applies innovative approaches to training to motivate participation. A yearly training plan is set, implemented, and evaluated.



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