

Justifying the need to introduce and teach leadership competencies to medical undergraduate medical students

Saurabh RamBihariLal Shrivastava^{1,2*} and Prateek Saurabh Shrivastava²

¹Medical Education Unit Coordinator and Member of the Institute Research Council and ²Department of Community Medicine, Shri Sathya Sai Medical College & Research Institute, Sri Balaji Vidyapeeth (SBV) - Deemed to be University, Ammapettai Village, Nellikuppam, Chengalpet District, Tamil Nadu, India

Received: 9th April 2021; **Accepted:** 8th December 2021; **Published:** 01st January 2022

Abstract: The field of medicine continues to change with each day, which makes the overall process of health care delivery a challenging one for the current crop of medical undergraduates. An extensive search of all materials related to the topic was carried out in the PubMed search engine and a total of 5 articles were selected based upon the suitability with the current review objectives and analyzed. The undergraduate medical education has prioritized the domains of diagnosis and management of a disease, with a negligible focus towards the other aspects (viz. leadership, professionalism, system-based practice, etc.), which significantly determine the delivery of safe and quality assured health care services. Preparing a medical undergraduate student for tomorrow, without exposing them to leadership and managerial skills cannot be considered as the right approach in medical training. The need of the hour is to design a set of leadership competencies, incorporate them in the curriculum and assess them periodically. In conclusion, regardless of the stage of the career, a medical doctor is expected to discharge leadership role and work as a member of the health team to deliver encouraging results. Keeping this in mind, it becomes an indispensable requirement to expose the undergraduate medical students to leadership competencies within their training period and prepare them for their future role.

Keywords: Leadership, Competencies, Undergraduate medical education.

Introduction

The field of medicine continues to change with each day, which makes the overall process of health care delivery a challenging one for the current crop of medical undergraduates [1]. In order to deliver quality assured care, apart from medical knowledge and clinical skills, the treating doctor must have an understanding about the working of a hospital as a system and the various factors influencing the same [1].

In addition, the physician should demonstrate better leadership skills, communication skills, team-work, professionalism, etc. In-fact, with the passage of time, the medical care has become more of an inter professional & interdisciplinary care, which essentially demands better leadership (who becomes the leader of the health team) and teamwork (as a member of the health team) [1-2].

Methods

An extensive search of all materials related to the topic was carried out in the PubMed search engine. Relevant research articles focusing on leadership and undergraduate medical education published in the period 2009 to 2020 were included in the review. A total of 7 studies similar to current study objectives was identified initially, of which, 2 were excluded due to the unavailability of the complete version of the articles.

Overall, 5 articles were selected based upon the suitability with the current review objectives and analyzed. Keywords used in the search include leadership and undergraduate medical education. The collected information is presented under the following sub-headings, namely Leadership and Medical Education, Spectrum of

leadership skills, Significance of leadership skills, Leadership Competencies: Curriculum, Teaching-learning methods, Assessment, Existing challenges and Potential solutions.

Leadership and Medical Education:

The undergraduate medical education has prioritized the domains of diagnosis and management of a disease, with a negligible focus towards the other aspects (viz. leadership, professionalism, system-based practice, evidence-based medicine, quality management, etc.), which significantly determine the delivery of safe and quality assured health care services [2-3].

Acknowledging the importance of the leadership role and ability to work as a member of the team, most of the regulatory bodies across the world have acknowledged it as one of the core competencies. However, the issue is that despite its inclusion, we fall short in terms of giving an adequate number of learning experiences to the students [1-3].

Spectrum of leadership skills:

The spectrum of leadership skills includes communication, ethics, ability to resolve conflicts, public speaking skills, risk management, negotiation, demonstrate empathy, being cultural sensitivity, professional, inspirational, committed to the task, demonstrate confidence, etc. [1,2]. From the health care establishment perspective, better leadership demonstrated by doctors translates into a reduced incidence of litigation, improved patient outcomes, and better individual & team performance [2].

Significance of leadership skills:

The leadership skills are quite essential to effectively run medical departments, wherein the doctors become the leader by default and all the remaining members work based on the instructions given by them [3]. Preparing a medical undergraduate student for tomorrow, without exposing them to leadership and managerial skills cannot be considered as the right approach in medical training [4]. From the medical students' perspective, they refine their soft skills, communication skills, time management, stress management, and problem-solving skills. From the patient's perspective, they

receive safe & quality assured care, are better informed about their condition, and in many ways entire family is taken into confidence [2-3].

Leadership Competencies: Curriculum, Teaching-learning methods, Assessment:

The need of the hour is to design a set of leadership competencies, incorporate them in the curriculum and assess them periodically [4]. These competencies should be spread throughout the training period, should progress from easy to advanced competencies, and essentially employ spiral curriculum design, so that learning objectives can be modified depending on the needs. The planned sessions should be a mix of theory and practical, which can start with a clarification of theoretical concepts and should be followed by hands-on practical sessions [4-5].

A wide range of teaching-learning methods (viz. role plays, project-based approach, problem-based learning, simulation, workshops, videos, etc.) can be employed based on the objectives to effectively deliver the learning experience to the students [4]. However, the learning experiences have to be supplemented with assessments to monitor the learning progression. The leadership competencies can be assessed via self-assessment, peer assessment, case-based assessment, workplace-based assessment, objective structured clinical examination, conventional theory questions or by means of portfolios, in either formative or summative assessments. It is a must that the entire initiative is evaluated periodically to ascertain the accomplishment of learning outcomes and take remedial measures, if necessary [3-5].

Existing challenges:

However, we must admit that the process of designing and implementation of leadership competencies within the curriculum is a challenging task [4]. In the designing phase, it is a must that all the involved stakeholders are convinced about the need to teach & assess leadership competencies, which in turn will depend on the formulation of precise goal and objectives, the background planning, and

collaboration with other stakeholders [2-4]. We must also fit the teaching part within the available timeframe without stretching the course further and give due consideration to the sociocultural background. In the implementation stage, extracting support from all the available staff members & administrators and financial support plays an important role [3-5].

Potential solutions:

These challenges can be effectively tackled by ensuring the involvement of the administrators, the Curriculum Committee and the Medical Education Unit. The administrators can take care of the logistics and provide necessary instructions for ensuring support of all faculty members, while the curriculum committee can design the inclusion of leadership competencies in the

Financial Support and sponsorship: Nil

curriculum without disturbing the existing teaching schedule. The Medical Education Unit plays an important role in enhancing the acceptance of teaching and assessing leadership competencies by organizing capacity building sessions [4-5].

Conclusion

In conclusion, regardless of the stage of the career, a medical doctor is expected to discharge leadership role and work as a member of the health team to deliver encouraging results. Keeping this in mind, it becomes an indispensable requirement to expose the undergraduate medical students to leadership competencies within their training period and prepare them for their future role.

Conflicts of interest: There are no conflicts of interest.

References

1. Clyne B, Rapoza B, George P. Leadership in undergraduate medical education: Training future physician leaders. *R I Med J* (2013). 2015; 98:36-40.
2. Varkey P, Peloquin J, Reed D, Lindor K, Harris I. Leadership curriculum in undergraduate medical education: a study of student and faculty perspectives. *Med Teach*. 2009; 31: 244-250.
3. Till A, McKimm J, Swanwick T. Twelve tips for integrating leadership development into undergraduate medical education. *Med Teach*. 2018; 40:1214-1220.
4. Webb AM, Tshipis NE, McClellan TR, McNeil MJ, Xu M, Doty JP, et al. A first step toward understanding best practices in leadership training in undergraduate medical education: a systematic review. *Acad Med*. 2014; 89:1563-1570.
5. Rajeh N, Grant J, Farsi J, Tekian A. Contextual analysis of stakeholder opinion on management and leadership

competencies for undergraduate medical education: Informing course design. *J Med Educ Curric Dev*. 2020; 7: 2382120520948866.

Cite this article as: Shrivastava SR and Shrivastava PS. Justifying the need to introduce and teach leadership competencies to medical undergraduate medical students. *Al Ameen J Med Sci* 2022; 15(1): 4-6

This is an open access article distributed under the terms of the Creative Commons Attribution-Non Commercial (CC BY-NC 4.0) License, which allows others to remix, adapt and build upon this work non-commercially, as long as the author is credited and the new creations are licensed under the identical terms.

*All correspondences to: Dr. Saurabh RamBihariLal Shrivastava, MD Community Medicine, FAIMER, PGDHHM, DHRM, FCS, ACME. Professor, Department of Community Medicine, Shri Sathya Sai Medical College & Research Institute, Sri Balaji Vidyapeeth (SBV) - Deemed to be University, Ammapettai Village, Thiruporur - Guduvancherry Main Road, Sembakkam Post, Chengalpet District-603108, Tamil Nadu, India. E-mail: drshrishri2008@gmail.com