

# Role of journal club in Canadian ophthalmology residency training: a national survey of program directors

Sarah J. Mullen, MD, Kouros Sabri, MBChB

## ABSTRACT • RÉSUMÉ

**Objective:** To conduct a national survey of journal club curricula in Canadian ophthalmology residency programs.

**Design:** Cross-sectional web-based survey.

**Participants:** Fifteen Royal College of Physicians and Surgeons of Canada (RCPC) ophthalmology residency program directors.

**Methods:** The 15 RCPC ophthalmology residency program directors were invited to participate in a 31-item online survey. The survey inquired about the purpose, educational goals, and structure of journal club. Basic statistics were performed to compare responses across institutions.

**Results:** Thirteen of the 15 program directors replied, representing an 87% response rate. Twelve (92%) institutions maintained a journal club. All of the program directors surveyed felt that journal club had educational value. Resident attendance was typically mandatory (75%) and correspondingly high across programs. There was 100% agreement that randomized controlled trials were most often selected for review. The primary journal club objectives were for residents to develop critical appraisal skills and to conduct a literature search (67%). Formal teaching and evaluation of these skills were not prioritized by any program. Seventeen percent felt the most important objective was to impact clinical practice.

**Conclusions:** Canadian ophthalmology program directors expressed high levels of satisfaction that journal club was effective in meeting its stated objectives. This indicates that the teaching model promoted resident critical appraisal skills; however, objective evaluation methods to assess resident competence in evidence-based medicine were not described by any respondents. As RCPC ophthalmology programs transition to competency-based medical education, program directors may consider modifying journal club curriculum, broadening its utility toward a means of outcome assessment.

**Objectif :** Réaliser un sondage national sur le programme des clubs de lecture des programmes canadiens de résidence en ophtalmologie.

**Nature :** Sondage transversal en ligne.

**Participants :** 15 directeurs de programmes de résidence en ophtalmologie du Collège royal des médecins et chirurgiens du Canada (CRMCC).

**Méthodes :** Les 15 directeurs de programmes ont été invités à participer à un sondage en ligne de 31 questions. Le sondage contenait des questions sur le but, les objectifs éducatifs et la structure du club de lecture. Nous avons compilé des statistiques de base pour comparer les réponses entre les établissements.

**Résultats :** 13 des 15 directeurs de programme ont répondu, ce qui représente un taux de réponse de 87 %. 12 établissements (92 %) avaient un club de lecture. Tous les directeurs de programmes interrogés ont répondu que le club de lecture avait une valeur éducative. La participation des résidents était généralement obligatoire (75 %) et, de ce fait, elle était élevée dans tous les programmes. Tous étaient d'accord (100 %) que les essais randomisés contrôlés étaient le plus souvent choisis comme lecture. Les principaux objectifs des clubs de lecture sont de permettre aux résidents de développer des compétences en évaluation critique et de s'exercer à la recherche documentaire (67 %); toutefois, aucun des participants n'estimait que le club avait pour but l'enseignement formel ni l'évaluation de ces compétences. 17 % estimaient que l'objectif le plus important était d'influencer la pratique clinique.

**Conclusions :** Les directeurs de programmes d'ophtalmologie canadiens ont exprimé un niveau élevé de satisfaction par rapport à l'efficacité du club pour atteindre ses objectifs. Ces réponses montrent que le modèle d'enseignement valorise les compétences en évaluation critique des résidents. Cependant, aucun répondant n'a décrit de méthodes d'évaluation objectives pour évaluer la compétence des résidents en médecine factuelle. À l'heure où les programmes d'ophtalmologie du Collège royal passent à la formation médicale axée sur les compétences, les directeurs de programmes pourraient songer à modifier le programme du club de lecture de manière à en élargir l'utilité et à utiliser pour évaluer les résultats.

The shift toward competency and outcome-based medical education in Canada requires residents to achieve proficiency in 7 domains, known as the CanMEDS (Canadian Medical Education Directions for Specialists) competencies. These roles provide a fundamental framework for core physician abilities: (i) medical expert, (ii) professional, (iii) health advocate, (iv) scholar, (v) manager, (vi) collaborator, and (vii) communicator. The “scholar” role mandates that a physician demonstrates a lifelong commitment to reflective learning, as well as to the creation, dissemination, application, and translation of medical knowledge.<sup>1</sup> Among the key competencies of this role, physicians must be able to describe the principles of critical

appraisal, critically appraise evidence to address a clinical question, and integrate their conclusions into clinical care.

Journal clubs are a popular educational tool to foster critical appraisal skills and teach the principles of evidence-based medicine.<sup>2,3</sup> Although they exist in various formats, they involve the gathering of individuals to discuss the strengths, weaknesses, and clinical application of selected articles from the medical literature.

Journal clubs have played an active role in medical education for over 130 years. Sir William Osler organized a journal club at McGill University in 1875.<sup>4</sup> This tradition is maintained by the majority of postgraduate

medical education (PGME) training programs in North America today, with the prevalence of journal clubs across specialties ranging from 84% to 100%.<sup>5–8</sup> However, there is no clear consensus as to its optimal role or educational value in residency, particularly in ophthalmology training. We sought to determine the current role of journal clubs in Canadian ophthalmology residency programs. Additionally, our intent was to identify potential areas of improvement and to stimulate discussion on how to optimize the journal club experience for residents.

## METHODS

The 15 program directors of Royal College of Physicians and Surgeons of Canada (RCPC) ophthalmology residency programs were invited by email to participate in a web-based 31-item survey. The initial invitation, with 1 follow-up reminder email a week later, was sent during the fall of 2015. The survey data were anonymous and included multiple-choice, open-ended, and Likert-scale questions. Entry provision for all items on the questionnaire was required for submission. Each participant was able to submit only 1 survey. Respondents were questioned about the purpose, structure, organization, and perceived educational value of the journal club at their respective institutions. Data were entered into a spreadsheet and basic statistical analyses were performed.

## RESULTS

Of the 15 RCPC program directors surveyed, 13 (87%) responded. Twelve (92%) institutions maintained an active journal club. The mean total number of residents in each residency program was 15 (range 5–30). The results are summarized in Tables 1–5.

### Organization

Table 1 shows the organization of the journal clubs. The most common journal club meeting schedules were quarterly (33%) or monthly (33%). Fifty percent of meetings occurred at a local restaurant/club. The meeting was predominantly held during a weekday evening (92%). With regard to the length of meeting, 50% of the clubs met for 1 to 2 hours. None of the journal clubs reported meetings lasting longer than 4 hours, and 75% of journal clubs provided food at every meeting. One-third (33%) of institutions stated that their journal clubs were sponsored by the pharmaceutical industry.

### Attendance

Table 2 shows details of the attendance at the journal clubs. Three quarters (75%) of institutions reported that attendance was monitored at each meeting, as well as that journal club attendance was mandatory for their residents. The majority of the institutions (67%) reported that 75%–90% of their residents attended the journal clubs.

**Table 1—Organization**

Does your institution have an active journal club?	
Yes	92%
No	8%
How often does your journal club meet?	
Monthly	33%
Quarterly	33%
Other	25%
Bimonthly	8%
Weekly	0%
Biweekly	0%
Biannually	0%
Annually	0%
What is the venue for your journal club?	
Restaurant	50%
Hospital	25%
Site location varies per meeting	17%
Program director/faculty member's house	8%
When does your journal club meet?	
Weekday evening	92%
Weekday morning	8%
Weekday afternoon	0%
Weekday lunch	0%
Weekend	0%
How long is your journal club?	
1–2 hours	50%
2–4 hours	33%
< 1 hour	17%
> 4 hours	0%
Is food provided at each meeting?	
Yes	75%
No	17%
Sometimes	8%
Is journal club sponsored by a pharmaceutical company?	
No	67%
Yes	33%

No programs reported less than 50% resident attendance rates. This was in contrast to invited faculty member attendance, which was typically 25%–50%. None of the program directors reported faculty member attendance rates of over 90%. The majority of the institutions responded that their meetings included attendees other than residents and faculty members, such as medical students, fellows, orthoptists, and specialists outside the field of ophthalmology.

### Article selection

Table 3 highlights the details of the articles selected for review at journal clubs. Half of the institutions reviewed 2 articles per journal club, whereas the other half reviewed 3 or more articles per journal club; 100% of departments surveyed typically selected randomized controlled trials for review. The basis for article selection was primarily articles that represent contemporary or controversial issues in ophthalmology (67%).

### Teaching model

Table 4 represents the teaching model used for the journal clubs. The roles of residents and faculty members at journal club were relatively consistent across programs. Faculty members (83%) were typically responsible for selecting articles and facilitating the meeting (67%), whereas a discussion/summary prepared by residents

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