

ABSTRACT

An Evaluation of the Process of Curriculum Adaptation and Implementation of the Problem-Based Learning Curriculum at The Faculty of Medical Sciences, The University of the West Indies, St Augustine.

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In 1978 in a curriculum review the staff at the Faculty of Medicine at Mona expressed dissatisfaction with the traditional didactic method of teaching. Here the Faculty was first exposed to Problem-based learning (PBL). A Committee was set up to determine if there was need for expansion of the training of doctors in the region. It was agreed that this was necessary.

In August of 1976, the Government of Trinidad and Tobago agreed to authorize the University of the West Indies to develop a brief for the establishment of a medical school and teaching hospital at Mt Hope. In October of the same year, the Board of the Faculty of Medicine established a Faculty Steering Committee on Expansion in Medicine in Trinidad (FAST Committee). This committee made recommendations for the new curriculum and other innovations in the new Faculty at Mt Hope.

The physical plant at Mt hope, called the Eric Williams Medical Sciences Complex was completed in 1985. The first group of students, in Medicine, Dentistry and Veterinary Science entered in October 1998 to interact in the Phase I with a new innovative teaching strategy called Problem-Based Learning (PBL).

This study examines the best practice in medicine and proposes a medical education programme to produce best practice doctors. This curriculum is compared to the curriculum in the Phase I of the Medical School in the Faculty of Medical Sciences. The name change was due to the inclusion of Dental and Veterinary Schools and later a School of Pharmacy in the Faculty.

This study examines the features of best practice in medicine and develops a curriculum for producing best practice doctors. The Problem-based Learning curriculum at McMaster and Maastricht is examine to determine, the extent to which the curriculum at Mt Hope is an adaptation of these Problem-Based Learning curricula and the factors influencing the changes made. It evaluates: (1) the process of implementation of the new curriculum to determine the extent to which the principles of implementation were followed; (2) the extent to which the staff accepted and used the PBL curriculum; (3) the achievements of the students to determine the extent to which the adapted curriculum has achieved its objectives. The study also examines the deficiencies identified in the new curriculum and the attempts made to overcome these deficiencies.

The results indicated that the curriculum at Mt Hope compares favorably with a Best Practice curriculum although there are areas that need to be included. The Mt Hope curriculum is a hybrid PBL which has become institutionalized. It contains adaptations from both McMaster and Maastricht curricula. The planners of the Mt Hope curriculum without formal knowledge of the process of implementation followed the entire process suggesting that there may be a situation of intuitive implementation. That is anyone implementing a curriculum will follow the same steps whether they are aware of them or not.

The staff accepted PBL as a teaching strategy although their time spent in curriculum development activities was not rewarded. For the most part the curriculum was achieving its objectives while the students perceived it as being a PBL curriculum albeit a hybrid one. Both students and staff identified several deficiencies in the Mt Hope curriculum. The study identifies the steps taken to remedy them. A few deficiencies dealing with assessment still remain to be overcome.

The strengths and weakness of the new curriculum were identified and recommendations made for the improvement of the curriculum. An overall assessment of the curriculum was made.

Keywords

Curriculum Adaptation
Curriculum Implementation
Curriculum Evaluation
Medical Education
Problem-Based Learning