

## Competency – based Curriculum: Need & implications

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### Overview

“Change before you have to” – suits well to the forthcoming curricular reforms from 2019 academic year for Undergraduate Medical education of our country. A shift from traditional to competency based curriculum was warranted in order to ensure competent health professionals as first contact physicians; a long lost glory of health care system of our country. The palpable need was realized unanimously for quite some time, backed by the vast expanse of literature advocating its necessity.

The Proposed Graduate Medical Education regulation-2019 is a giant leap to actualize the theory of Indian Medical Graduate – IMG as envisaged by Medical Council of India. A competent IMG, identified on the basis of being competent in performing five roles; namely Clinician, Leader & member of Health care team, Communicator, Lifelong learner and Professional are analogous to the roles identified by Medical graduates in Canada (CanMeds), US (ACGME) & UK (GMC). A total of 35 competencies are identified against each role and subsequently translated into subject specific competencies for deciphering the significance of various subjects in a medical curriculum. Professional competence is characterized by habitual and judicious use of communication, knowledge, technical skills, clinical reasoning, emotions, attitudes, values, attitudes and reflections. Besides knowledge, right set of skills and attitude are vital characteristics of a competent health professional, hence; AETCOM (Attitude, Ethics and Communication) module also finds its rightful place within the revised curriculum.

### Implication

Competency based education forms the basis for Outcome based Education, wherein learning outcomes assume greater importance than the learning process itself. The entire framework is built upon health needs of the society and health systems that drive the entire curriculum. Overall the reform focuses on competencies, integration of contents and flexibility. The various incorporations as a part of CBME, as laid out by MCI are Foundation course, Early clinical exposure, Alignment and Integration, skill teaching, Self directed learning, formative assessments, skill teaching, student doctor method of training to name a few. The new regulations have proposed frameworks and Medical schools are expected to function within its ambit with relevant & desirable initiatives. Based on the proposed guidelines and principles, medical schools need to plan their road-map for smooth implementation of various reforms and robust curriculum evaluation methods for guiding this reform.

Change is always associated with a plethora of challenges and opportunities. The anticipated challenges towards this curricular reform can be grouped under those pertaining to 1. Institutional readiness 2. Training of trainers 3. Period of overlap (revised versus traditional curriculum) 4. Curriculum handling 5. Outcome evaluation and 6. Various policy frameworks. Curricular governance, as put forth by MCI, can serve as a practical guide to tide over these lurking challenges. Ongoing Curriculum Implementation and Support program (CISP) can play a vital role in bracing academic and administrative leads for this reform. Period of overlap can be meticulously planned beforehand so that no batch suffers the brunt. Curriculum handling can be judiciously governed by meticulous planning, thoughtful implementation and interim corrective measures. Capacity building through Medical education units can be majorly instrumental in need based training and sensitizations throughout the implementation phase. Internal Quality Assurance cell (IQAC), with its proactive monitoring mechanisms right from the planning phase can prove worthy in stabilizing the curriculum with relevant & timely modifications.

The stakes are huge and the repercussions great! Change cannot happen overnight, however; it is the collective effort that lends true worth to the entire journey. Let us embrace this change with open mind, optimistic approach and contribute to the best of our abilities for better outcomes in medical education of our country.