

076:PFIZ02.W51

"FACT SHEET" FOR CONNIE PARTINGTON
CURRICULUM AND FACULTY DEVELOPMENT FOR CLINICAL TEACHING AT THE
TRINIDAD CAMPUS OF THE UNIVERSITY OF THE WEST INDIES
October 8, 1992
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The University of the West Indies, located in Kingston, Jamaica, has a medical school that provides medical education for the English-speaking peoples of the Caribbean. Originally founded on and still oriented towards British systems of medical education, it is one of the best medical schools available for Caribbean medical students.

Historically, the University of the West Indies has had its main campus in Jamaica and all students have received their preclinical education there. Secondary campuses for clinical education of medical students have existed in Barbados and in Port of Spain, Trinidad. In 1990, the Trinidad campus program was expanded to include preclinical education. Both basic science buildings and modern and largely unused hospital buildings exist there.

The School of Medicine at Case Western Reserve University is internationally known for its leadership in medical curriculum development. Not only has this reputation led to incorporation of many CWRU-originated curricular reforms into the educational programs of other North American medical schools, but visitors from medical schools in many other countries have visited CWRU to survey our curriculum and teaching programs. The Center for International Health has a program for faculty development and curriculum reform in Laos, and the Center was recently awarded a grant for similar activities at the Institute of Public Health of Makerere University in Uganda.

Dr. Morris Dixon, Associate Professor of Pediatrics and International Health, has had a long-standing relationship with the University of the West Indies. He has served as an interim chairman of the Department of Pediatrics in Jamaica for a year. He has visited and surveyed the Trinidad clinical facility and devised a pediatric residency program for that center. Dr. Dixon has corresponded with peer faculty members at the University of the West Indies in Jamaica and Trinidad and found them interested in joining with CWRU in efforts at clinical curriculum and faculty development.

A collaborative program to enhance the clinical teaching programs of the Trinidad campus of the University of the West Indies would face several potential obstacles, which must be recognized if they are to be overcome. Three of them are 1) an entrenched substandard patient care system; 2) British style, organization, and traditions of medical education, which differ

greatly from those of CWRU; and 3) a perception by University of the West Indies faculty that what they need most is more experience in North American high technology medicine (ie, intensive care). However, optimism is warranted with respect to these potential problems because 1) there appears to be a genuine desire to upgrade patient care in Trinidad; 2) the Trinidad faculty has already adopted many aspects of North American medical educational systems; and 3) Trinidad faculty members appear to be genuinely interested in improving teaching in areas relevant to Trinidad's medical needs.

The Center for International Health would like to explore the possibility of developing a relationship with the Trinidad campus of the University of the West Indies aimed at upgrading their clinical teaching programs. The program of work would have to be undertaken in several phases. The first phase, which might last about two years, would be a survey and needs assessment, during which some sort of consensus would have to be achieved between key faculty elements of the University of the West Indies and CWRU. The second phase, which would depend both on having achieved a consensus and on enthusiasm for change in Trinidad, would be devoted to planning for curriculum reform and faculty development. This phase would last one to two years. A third phase would be devoted to implementation. It might begin in the third year, and would continue for several years.

We estimate that this educational program would require approximately \$50,000 annually for 5 years. One good funding approach would be a small grant for project initiation and planning - the first two phases mentioned above - over about 2 to 3 years; then larger sums for implementation for about 2 to 3 years. If the program is successful, additional funding might be needed for implementation activities; I would hope that only small sums would be necessary beyond 5 years.