







لمعايير الجودة والإعتماد الإكاديمي

المؤتمر السنوي الأول للتقييم الذاتي لمعايير الجودة والاعتماد الأكاديمي

## PROBLEM BASED LEARNING IN 21 UMAS



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التعلم المبني على المشكلات في جامعة 21 سبتمبر للعلوم الطبية والتطبيقية

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# "Nothing can be taught, everything can be learnt."

Chinese proverb





## Characteristics Needed in College Graduates

- 1) High level of communication skills.
- 2) Ability to <u>define problems</u>, gather and evaluate information, develop solutions.
- 3) Team skills -- ability to work with others.
- 4) Ability to use all of the above to address problems in a complex <u>real-world setting</u>.







## New-Innovative Curricula



## Traditional Medical Curricula

**S** Student-centered

**Teacher-centered** 

P Problem-based

**Information gathering** 

**I** Integrated

Discipline-based

**C** Community-based

**Hospital based** 

**E** Elective

Standard

**S** Systematic

**Apprenticeship-based** 





- □ PBL <u>students</u> generate explanations that are <u>more</u> accurate, coherent and comprehensive than non PBL students.
- They transfer the <u>reasoning</u>
  <a href="mailto:strategies">strategies</a> that they are taught and are more likely to use science concepts in their explanations. (Hmlo, 1998)





#### **History of PBL**

#### Background

- Information is not all you need to solve a problem
- The amount of information is growing exponentially no one person can keep up

#### Started in medical school

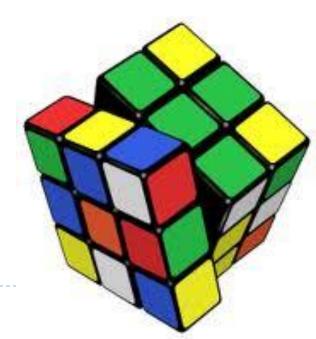
- 1913 Sir William Ossler (concerning the education of medical students) "
  too great a reliance on lectures and on students' capability of memorising a
  growing number of items of knowledge."
- ► 1950's integrated systems teaching in USA medical school
- 1960's PBL introduced in Canadian medical school
- 1970's many USA and worldwide medical schools adopted PBL
- 1990's introduced into medical schools in UK by Manchester, Glasgow and Liverpool universities.





#### Problem based learning (PBL)

PBL is an educational format that is based on discussion and learning about a clinically - based problem.







#### Problem Solving vs Problem Based Learning

Problem Solving: Arriving at decisions based <u>on prior</u> <u>knowledge and reasoning</u>

Problem Based Learning: The process of acquiring new knowledge based on recognition of a need to learn.





#### Goals of PBL

- I. To improve the motivation of the students.
- 2. To stimulate integration of disciplines.
- 4. To improve self directed and long term learning.
- 5. To improve critical thinking, clinical reasoning, decision making and problem solving.
- 6. To make education more student oriented.
- 7. To stimulate formative evaluation.
- 8. To stimulate small group learning and development of interpersonal communication skills.





#### **Disadvantages of PBL**

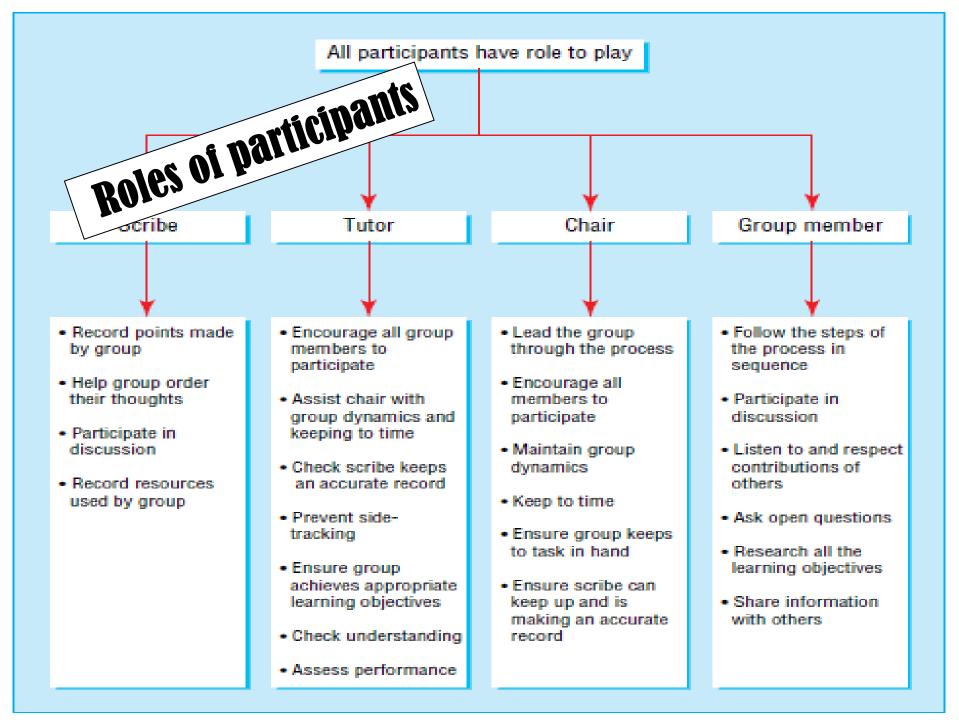
- Tutors who can't "teach"
- Demanding of staff time
- Stressful for students and staff
- Information overload
- May be difficult to implement when class sizes are large or if there is lack of enthusiasm for the idea.





#### The Seven Step Model (Wood, 2003)

- **Step I** Identify and clarify unfamiliar <u>terms</u> presented in the scenario, (allocate a scribe and a chairperson, define rules)
- > Step 2 Define the problem or problems to be discussed;
- **Step 3** Ideas <u>storming</u> session to discuss the problem(s),
- **Step 4** Review steps 2 and 3 and arrange explanations into tentative solutions;
- **Step 5** Formulate <u>learning objectives</u>;
- Step 6 Private study (all students gather information related to each learning objective)
- Step 7 Reconvene Group shares results of private study







#### **Good PBL Facilitator.**

- A knowledge of the PBL process
- Commitment to <u>student directed learning</u>
- Ability to generate a <u>non-threatening environment</u> whilst still acting to promote discussion and critical thinking
- An ability to facilitate and not teach.
- Willingness to make constructive evaluation of student and group performance.
- Availability of well constructed facilitator guide.

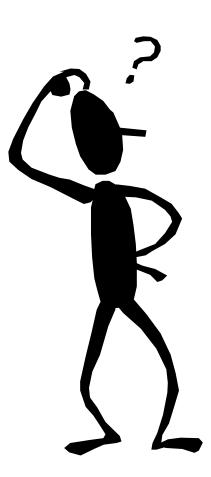






#### **How to Facilitate PBL?**

- Small groups of students (<8).</p>
- Groups usually meet twice a week for around 2 hours.
- At the first meeting new situation or problem (trigger).
- Identification of the main issues and questions.
- Period of individual study (2-3 days) group reconvenes.
- Group discussion and sharing knowledge.
- Supporting activities (labs, lectures).
- Presentation.







#### Art of constructing PBL Scenarios

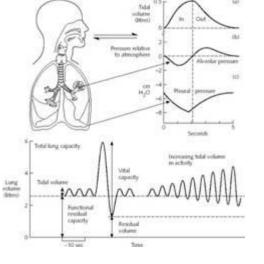
An instructional student-centered approach which uses carefully constructed clinical problems as a context for students to: define their learning needs, conduct self-directed enquiry, integrate theory and practice, and apply knowledge and skills to develop a solution to a defined problem.



#### PBL Trigger material

- Paper based clinical scenarios
- Experimental or clinical laboratory data
- Photographs
- Video clips
- Newspaper articles
- An article from a scientific journal
- A real or simulated patient
- A family tree showing an inherited disorder









### What about 21 UMAS?





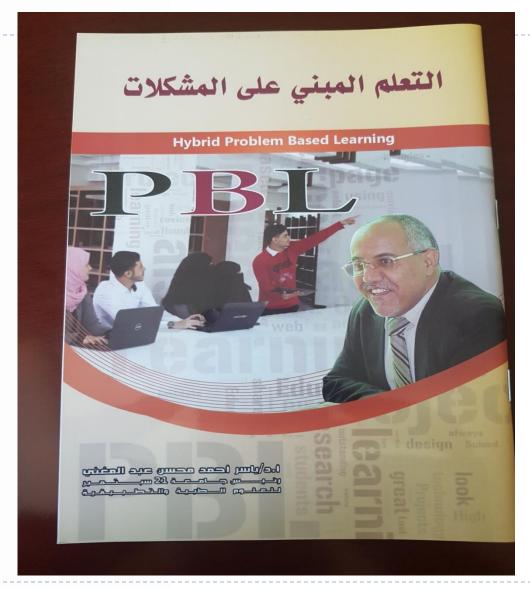
#### Hybrid curricula

In preclinical phase, PBL scenarios are designed and timetabled so as to <u>complement</u> other teaching methods such as:

- Lectures
- Practical, other laboratory work
- Computer-assisted learning
- Elearning, virtual class room and virtual lab







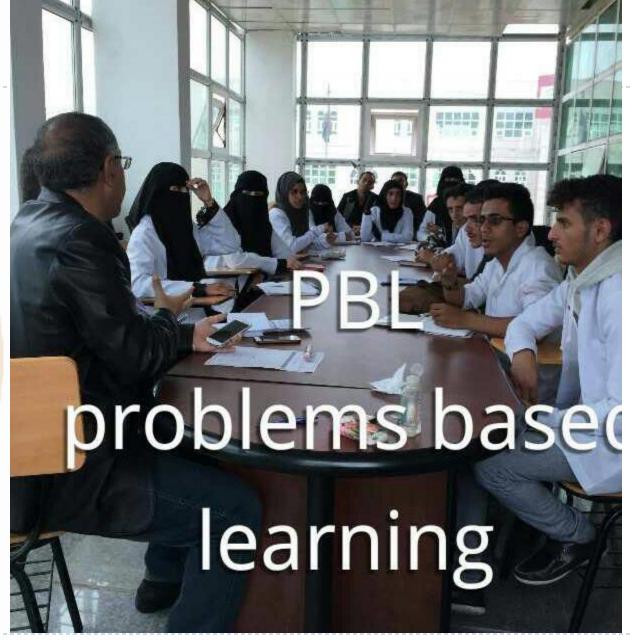
















#### **FULL TIME AND HYBRID**

- ▶ 14 WEEKS : BLOCK 12 WEEKS
- SCENARIOS IN PARALLEL WITH LECTURES :
  MATCHING CURRICULUM ILOS
- ► GROUPING STUDENT (FOR LECTURES VS PBL)





عدد مجموعات		
PBL	الكلية	
54	الطب البشري	
18	كلية الصيدلة	
12	الطب المخبري	
12	كلية التمريض	
15	الادارة الطبية	
111	المجموع الكلي	

- المؤتمر السنوي الأول للتقييم الذاتي لمعايير الجودة والاعتماد الأكاديمي الأول للتقييم الذاتي لمعايير الجودة والاعتماد الأكاديمي A 45-year-old man comes to the emergency department complaining of severe pain on his right flank. There is no evidence of
- injury. Patient is a farmer and been working in the yard all day and appears dehydrated.
- The patient describes a **colicky pain** that has a sudden onset localized to the flank area associated with **dysuria**. During the examination, the patient appears extremely restless and unable to find a comfortable position. He is capable of providing a small volume of urine for analysis which shows blood and amorphous Ca oxalate crystals in urine.
- Ultrasound demonstrates a stone in the left kidney.
- Initial treatment and pain management is given and patient transferred to urologist for consultation.

#### Tutor guide:

- Urine in the renal calyx passes successively through the ureter, bladder, and urethra before exiting the body. Urine movement through the ureter is accomplished by peristalsis of the smooth muscle of the ureter. Kidney stones can become lodged in the ureter especially at the ureteropelvic junction, where the ureters cross the pelvic inlet, and at the ureterovesical junction. Lodging of kidney stones causes significant pain and possibly causes damage to the ureter. Damage to the endothelium of the urinary tract results in the appearance of a small number of red blood cells in the urine called microscopic hematuria. The associated pain likely underlies the elevation in blood pressure and heart rate shown by the patient.
- Fluid balance within the body requires adjusting accumulation, through ingestion and metabolism against elimination in the urine, feces, breath, skin and sweat. Excessive sweating in the absence of additional water ingestion results in dehydration, characterized by a decrease in both the extracellular and cell water stores result in decrease in urine volume and concentrated urine.
- One unintended consequence of the production of highly concentrated urine is the precipitation of salt crystals in renal calyces (formation of renal stone)...

#### Scenario objectives:

- Primary:
- Anatomy of urinary system.
- Excretion function of U.S. and it's role in Fluid balance.
- Secondary:
- Causes, prevention and management of renal stone.















# التقييم الإلكتروني لمنهجية التعلم المبني على المشكلات PBL





اداء المدرسين	ضعيف	مقيول	حيد ٧	▼ ممتاز
	20	81	294	287
	0.041493776	0.168049793	0.402489627	0.387966805
PBL قصول ال	ضعيف	مقيول	جيد	ممتاز
	37	83	297	265
	0.076763485	0.17219917	0.408713693	0.342323651
وضوح السيتاريوهات	ضعيف	مقيول	جيد	ممتاز
	23	76	299	284
	0.047717842	0.157676349	0.412863071	0.381742739
توزيع المجموعات	ضعيف	مقبول	جيد	ممتاز
	39	68	248	327
	0.080912863	0.141078838	0.307053942	0.470954357
اوقات البرتامج	ضعيف	مقبول	جيد	ممتاز
	77	103	290	212
	0.159751037	0.213692946	0.394190871	0.232365145
مطابقة السيناريوهات لمخرجات التعليم	ضعيف	مقبول	جيد	ممتاز
	19	52	283	326
	0.039583333	0.108333333	0.38125	0.470833333
سهولة الوصول لمخرجات التعليم المطلوبة	ضعيف	مقبول	جيد	ممتاز
	14	52	307	309
	0.029045643	0.107883817	0.429460581	0.433609959
رأيك في برتامج ال PBL	ضعيف	مقبول	جيد	ممتاز
	4	17	160	501
	0.008298755	0.03526971	0.124481328	0.831950207









#### المؤتمر السروكال Problem Based Learning (PBL) المؤتمر السروكال



- One of the investors set up a medical hospital in order to obtain a medical staff at the lowest cost. He got doctors who had two conditions:
- ▶ I Getting a monthly salary estimated 10 thousand riyals to get a monthly allowance fixed 10% of the salary of the first month or basic until the salary reaches 150 thousand riyals and then become fixed and the duration of the contract not less than 10 years.
- 2 Getting a monthly salary of 10 thousand riyals and a fixed rate of 5% over the ten years. They asked the manger to respond within ten minutes. The manager contacted one of his colleagues Management from the college of Medical Management to help him and he told him to use the sequences for the best option
- (Required : Director's response within 10 minutes)

















#### PBL leads to

- Improvement in student attitude and clinical performance (Vernon and Blake, 1993)
- Deeper approach to learning (Newble and Clarke, 1986)
- Better interpersonal skills and attitudes towards
   patients (Nandi et al.,2000)