

Research in Medical Education

The year 2009 saw a number of developments in Medical Education in Malta that were initiated as a result of a commitment to revising the medical curriculum in order to meet the challenges in medical education. A record number of students were admitted to the medical course in 2009. There is concern that eventually this exponential increase in admissions is not sustainable due to infrastructural, financial and human resource restraints. Meanwhile there has been a simultaneous attempt to re-vamp the first and second year curriculum and to continue to fine tune the curriculum in years three, four and five. Students are now introduced to clinical scenarios as early as during the first year of the medical course and case based learning is being implemented into a modular system of teaching that integrates anatomy, physiology, biochemistry and genetics to ensure a holistic approach to understanding the human body in health and subsequently in disease. It is hoped that such changes will bring the University of Malta Medical School more in line with the ethos of the Bologna process and the European Credit Transfer System.

A further notable development is the commitment to research in medical education that is now evident both locally and on an international niveau. The European Union has recently granted funding for a further three years to the Medical Education Network in Europe (MEDINE). MEDINE-2 has a number of task forces with one specifically dedicated to the establishment of norms and standards for the inclusion of research in medical curricula and the possibility of doing so within the framework proposed by Bologna. Amongst the issues to be studied are the structures available in different medical schools in Europe, the funding of such programmes as well as the establishment of

networks for exchange of both staff and students and hence the promulgation of research and development within the field of the health sciences.

Locally we are seeing a number of graduates keen on doing research enrolling in Masters or Doctoral programmes both locally and abroad. Since joining the European Union, scholars and scientists can apply for EU funding, a process that remains a challenge despite increased infrastructural support. The Maltese Government also offers a number of scholarships to students showing promise in research but the supply of funds still falls significantly short of the demand. There is also a danger that with the explosion in student admissions, academic staff will face the prospect of heavier teaching schedules at the expense of research. This would represent a major setback in the University's attempt to establish itself as a frontline state of the art tertiary educational facility. Careful strategic planning necessitates SWOT analysis, establishment of the competances and outcomes that are being promoted as well as the academic, financial and infrastructural deliberations that belong to such a process of development and expansion. Timelines need to be established with a stepwise implementation of proposed changes that allows adequate and timely training of staff and personnel. Similarly the impact of innovative teaching methods on undergraduate students in a one cycle degree course needs to be carefully assessed and student feedback sought and analysed. In this manner a framework for these positive and exciting developments in medical education can be established which safeguards student-centred and student-driven learning in a nurturing academic environment to the ultimate benefit of those who are burdened with disease.

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Editor