# Medical Students' Conception of Professionalism: The Impact of an Early Family Doctor Attachment





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#### Introduction

The goal of undergraduate medical education is to nurture the development of doctors with the professional attributes required for quality patient care.1 A systematic review shows that early clinical contact helps students develop a professional identity.2 Also, early patient interaction with clinician-led small groups results in broader, more complex understanding of professionalism.<sup>3</sup> Family Medicine has strong sociologic and humanistic focus with volume and diversity of patients which helps develop respect and understanding.4 Therefore, "Becoming a Doctor: Professionalism in Practice" (PiP), a 3-year longitudinal programme, was first launched in September 2012 for medical students in the new undergraduate curriculum in a university in Hong Kong, where they attach to a community family doctor in the first three years of study. The aim of this study was to investigate medical students' conception of professionalism after the first year of PiP programme.

#### Professionalism in Practice Programme (PiP)

- Aim to facilitate positive professional attitudes and behaviours and to encourage students to explore their own ideas of professionalism
- Longitudinal, anchored by attachment to the same family doctor over 3 years, supported by small group discussion, workshop, and reflective writing
- Provide **experiential learning** in family practice setting, role modeling, and feedback from tutor









#### Methods

This qualitative study was carried out from October 2012 to October 2013. All 210 Year 1 MBBS students at the LKS Faculty of Medicine, HKU, were invited to participate. Qualitative data was obtained from (1) written questionnaire survey, (2) student written assignments including a reflective writing on professionalism in the family doctor attachment and a personal oath about the tenets of professionalism, and (3) focus group interviews. Thematic analysis was done individually by investigators on transcribed data to identify and categorize emerged themes. The investigators met to carry out further refinement of themes with differences resolved by consensus.

#### Results

Professionalism was conceptualized in 3 main ways: (1) Personal attributes, (2) Characteristics of family practice, and (3) Self-care. Most frequent themes with quotes identified are as follows:

#### Work-life balance

•"A doctor is inevitably subjected to stress of work and thus maintenance of work-life balance is fundamental. Dr K suggested spending time with family whenever available using time management skills to balance our lives... we should treasure the time with our families and the time in which we pursue our interest because life is not just about work."

#### Own health

- •"I will try to keep myself healthy in both physical and mental way, in order to maintain the high performance during medical practice."
- "I will maintain a healthy and balanced life style. I will take care of my own health and set an example to other people."

## Self-care

#### Respectful

• "I will respect all people who had taught valuable medical knowledge to me. I will treat them not only as teachers to my knowledge, but also teachers to my life. I will respect all patients I meet in hospitals and clinics. I will respect all my **classmates**. I will respect myself as a medical student."

#### Personal attributes

#### Responsible

• "I promise to be committed, because I know that once I uptake the role of being a medical student, it signifies something beyond, that I am entering a medical path hopefully as my life-long profession that I hold not only responsible to myself, but also to society which has spent resources in nurturing me as who I am."

### Characteristics of family practice

#### Holistic care

• "... every time after giving advice and medication regarding the illness to the patient, Dr. T would chat further with the patient about their family life and how they are getting on with their work... A patient does not merely need the treatment for a particular illness, but also the comprehensive care to their development as a human being. Through establishing a friendly or even parental doctor-patient relationship, the patient's physical, mental and social well-being can be well catered for."

#### Effective communication

• "It was not hard to notice Dr. C talked to each of them in different tones and manners. When giving consultation to kids, Dr. C gives very clear directions... He talked in a special manner... a clean and close to talking-to-adult manner with more intonation... When a middle aged woman who shows depressive symptoms walked in, he talked in a lower voice with authority and calmness... he frequently provides viewpoints from different angles of the problem."

#### Discussion

Students' conception of professionalism showed some consistency with other proposed conceptual frameworks<sup>5,6</sup>. The result also showed that students had considered the nature of family practice and doctor-patient relationship as professionalism.

Early attachment to family doctors is beneficial to students to help them begin to develop a personal conception of professionalism. Family doctors are in a powerful position to influence students attitudes towards family medicine, patient care, and what it means to be a doctor. With the promising first year experience, students can revisit and reflect on changes in attitudes and perceptions of professionalism in subsequent years of the PiP.

#### References

- The Medical Curriculum Handbook: Li Ka Shing Faculty of Medicine ,The University of Hong Kong, 2010.
- Dornan T, Littlewood S, Margolis SA, Scherpbier A, Spencer J, Ypinazar V. How can experience in clinical and community settings contribute to early medical education? A BEME systematic review. Medical Teacher 2006;28(1):3-18.
- Baernstein A, Oelschlager A-MEA, Chang TA, Wenrich MD. Learning Professionalism: Perspectives of Preclinical Medical Students. Academic Medicine 2009;84(5):574-81
- Howe A. Teaching professionalism to students in the surgery: Department of Family Medicine and Primary Care, The University of Hong Kong, 2010.
- Arnold L, Stern D. What is medical professionalism. Measuring Medical Professionalism. Oxford: Oxford University Press, 2006. College of Family Physicians of Canada. Working Group on Curriculum Review. CanMEDS-Family Medicine: A Framework of Competencies in Family Medicine, 2009.