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THE SIGNIFICANCE OF SIMULATION TRAINING FOR FAMILY PHYSICIANS AS A TOOL FOR OBJECTIVE SELF-ASSESSMENT

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ABSTRACT

The article presents data on the study of the importance of simulation training for family doctors in the system of postgraduate continuing medical education. Along with the study of the professional and organizational structure of medical cadets studying at the Department of Advanced Training of Doctors of the Tashkent Medical Academy, a survey was conducted on the knowledge of using various simulators. As a result of the work carried out, it was found that the use of simulation teaching methods in the system of postgraduate education contributes to an objective self-assessment of their professional competence, which serves as a motivation for them to improve their knowledge and improve the quality of medical services in primary health care.

Key words: family medicine, public health, primary health care, advanced training of doctors, simulation teaching methods.

INTRODUCTION

Today, higher medical education is undergoing a deep modernization to train specialists of a new quality. One of the main directions is to improve the quality of

practical skills of graduates. But how to do that? The data published in the journal Healthcare based on the results of a survey of 1,000 young doctors show that only 23% of graduates rated their training at the university as good, 55% as satisfactory, and 22% as unsatisfactory. An even more serious situation manifested itself when young doctors assessed their practical skills and abilities formed at the university - only 12% considered their quality to be good [1,2].

In the system of postgraduate continuous medical education, at present, simulation training is one of the most popular modern methods, the main purpose of which is to develop the knowledge and practical skills of medical workers [4,5]. This will help the student of advanced training courses to independently assess their professional knowledge, skills and competencies, as well as confidently use them in full-fledged practical activities.

In the 2020-2021 academic year, 476 family doctors from 6 regions of the Republic of Uzbekistan were trained in 10 general advanced training courses (144 credits) and 9 thematic advanced training courses (72 credits) at the Department of Advanced Training of Doctors of the Tashkent Medical Academy. Practical classes on the use of simulators in the amount of 18 credits for each type of advanced training were held at the Department of Clinical Modeling of the Tashkent Medical Academy.

Purpose of the study: to study the importance of simulation training in advanced training courses for family doctors in the system of postgraduate continuing medical education.

Materials and methods. We have studied the organizational structure of medical students studying at the Department of Advanced Training of Physicians and obtained the following results.

Out of 300 students, 94 people. (31.3%) work in urban family polyclinics (SP), 206 people. (68.7%) - in rural family polyclinics and the so-called points of family doctors (formerly - rural medical center). When divided into groups according to age categories, doctors aged 25-30 years amounted to 2 people. (0.67%), 31-40 years old - 40 people. (13.3%), 41-50 years old - 107 people. (35.7%), 51-60 years old - 113 people. (37.7%) and 61-70 years old - 38 people. (12.6%). The work experience of the studied students in primary health care was as follows: up to 5 years - 7 people (2.3%), 6-10 years - 69 people. (23%), 11-20 years old - 102 people. (34%) and more than 20 years - 122 people (40.7%).

We also conducted a survey of all students of advanced training courses, using a questionnaire specially designed for primary care physicians and consisting of the following questions:

1. Are you familiar with the tasks of the simulation training system?

2. What methods of simulation training do you know?

3. What do you think is the advantage of simulation training for you personally?

4. What is the importance of simulation training in acquiring practical skills in the field of family medicine?

5. What skills do robot simulators require to master?

6. What skills can be strengthened through the Virtual Patient Program?

7. In what specialty do you think simulation training contributes to the acquisition of a wider range of skills?

8. Are simulation training hours sufficient in postgraduate continuing medical education? If not enough, what is your suggestion?

9. What other simulations do you think are needed to acquire the skills used in primary health care?

10. Problems that you have while working on simulators?

Results and analysis. When studying the results obtained, the following was established: the largest part (37.7%) of doctors trained at the Department of Advanced Training of Doctors of the Tashkent Medical Academy were of pre-retirement age (51-60 years old - 113 people), followed by students 41-50 years old - 107 people (35.7%), young professionals under the age of 35 accounted for 0.67%. These figures indicate that the majority of physicians currently working in primary health care are near retirement age or are already retired. In addition, family physicians aged 61-70 years make up 12.6% of the total number of trainees who have completed advanced training, and are the most numerous category with a work experience of 20 years or more (40.7%).

Analysis of the survey conducted among the students showed the following. To the question 1 “Do you know the tasks of the simulation training system?” received the answer "No" in 100%. To the second question of the questionnaire 2 “What methods of simulation training do you know?” all listeners of listeners indicated ECG and cardiopulmonary resuscitation, and 85% - ophthalmootoscopy. To question 3 “What do you think is the advantage of simulation training for you personally?” the absolute number of listeners answered almost the same “In improving their knowledge and practical skills. To the next question 4 “What is the importance of simulation training in acquiring practical skills in the specialty of a family doctor?” - 80% of doctors indicated very high.

Next, to question 5, “What skills do you need to use robot simulators to master?” the studied audience unanimously indicated the specialty "family doctor". At the same time, the majority of respondents noted that the current teaching hours of simulation classes (12 credits) are not enough in continuing medical education,

and the volume of these classes should be increased to at least 18 hours, which was the answer to the question “Are teaching hours of simulation training sufficient in postgraduate continuing medical education? If not enough, what is your suggestion? To the question “In your opinion, in which specialty does simulation training contribute to the acquisition of a wider range of skills?” All doctors (100%) noted that it was for family medicine specialists. “What skills can be strengthened through the Virtual Patient Program?” – family doctors noted the high efficiency of working with this simulator, as it contributes to the development of most of the practical skills necessary for family doctors. “Problems you have while working on simulators?” - the final question, to which the answer was received from all the surveyed listeners about the problems that arise when working with simulators, mainly there is a lack of skills in using computer technology and gadgets.

In the process of conducting the study, in accordance with international data, it was revealed that a properly organized methodological approach of teachers is the use of algorithms of practical skills that make the assimilation of skills clearer faster, automatism and the correctness of the performance of the skill are laid. And also the use of simulation technologies leads to mastering professional practical skills at a higher level than their theoretical description [3].

As a result of the above results and their analysis, it was found that the introduction of the simulation method of training in postgraduate continuing medical education / advanced training of doctors provides a continuous / systematic increase in the professional knowledge, competence, qualifications and skills of family doctors. The inclusion of simulation teaching methods in the components of their professional development creates an opportunity for doctors to evaluate their own knowledge, acquire additional knowledge and skills on an individual basis, and improve their personal competence. This, in turn, contributes to improving the quality of medical services provided by family doctors to the population.

Conclusions:

1. Simulation methods for teaching family doctors in the system of postgraduate continuing medical education are introduced into the curriculum for advanced training of doctors at the Tashkent Medical Academy;

2. The use of simulation teaching methods in the advanced training cycles of family doctors will help them objectively assess their personal competence;

3. The inclusion of simulation teaching methods in the process of professional development of practitioners increases the attractiveness of educational programs

and serves as a motivation to improve their knowledge in this educational institution;

4. The introduction of a simulation method of training in the advanced training of family doctors is of great importance in protecting public health by improving the quality of medical services provided at the primary health care level.

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