

PROCEEDING BOOK



FACULTY OF

MEDICINE

THE 11th JAKARTA MEETING ON MEDICAL EDUCATION

Building the Foundation of Humanistic Medical and Health Professions Education Through Partnership and Innovation

19 - 21 October 2018

DEPARTMENT OF MEDICAL EDUCATION
FACULTY OF MEDICINE UNIVERSITAS INDONESIA
IN COLLABORATION WITH
DUTCH FOUNDATION AND
ASIA PACIFIC MEDICAL EDUCATION NETWORK (APME-NET)

THE 11th

JAKARTA MEETING ON MEDICAL EDUCATION

Building the Foundation of Humanistic Medical and Health
Professions Education Through Partnership and Innovation

19 - 21 October 2018

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Greetings to all participants



WELCOME TO THE 11th JAKARTA MEETING ON MEDICAL EDUCATION

dr. Estivana Felaza, M.PdKed
Chairperson of The 11th Jakarta Meeting on Medical Education

Professionalism has been a topic widely discussed in medical and health profession education. Even though everyone believed that professionalism needs to be taught during education, we are still looking for the ideal method of teaching and assessing it. Humanism, considered as the progenitor of professionalism, needs to be nurtured during education process to help develop attributes of professionalism in students.

This year's Jakarta Meeting On Medical Education chose "Building the Foundation of Humanistic Medical and Health Profession Education Through Partnership and Innovation" as its theme. Globalization and advanced development of technology today emphasized the importance of partnerships between stakeholders and implementing innovations in education. These two aspects will be explored further through our workshops, plenaries, symposia, meet the experts, and free communication sessions. All participants could share experiences and learn from one another, initiate new ideas and innovations, as well as building network with national and international medical and health professional educators.

On behalf of the Organizing Committee, we would like to welcome you to our meeting, the 11th Jakarta Meeting On Medical Education.
Hope you have a wonderful time!

Sincerely yours,

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Schedule

Friday, October 19th, 2018

Day 1: Pre-conference workshop (PCW)

8 –12 AM (Auditorium IMERI, 3rd floor)

Title	Short description	Resource persons/facilitators
PCW 1: Assessment of teamwork in Interprofessional Education (IPE)	This workshop will take a comprehensive approach in addressing IPE assessments and facilitating implementation based on contextual needs and discusses the principles of assessment and blueprint design in IPE program.	Vishna Devi Nadarajah Diantha Soemantri
PCW 2: Cultural competence	This workshop will elaborate key topics in cultural competence in health professions comprehensively and encourage participants to discuss how cultural competence can be incorporated into teaching/learning and assessment.	Gominda Ponnamperuma Rita Mustika
PCW 3: Entrustable Professional Activities (EPA) and effective supervision for postgraduate health profession education program	Entrustable Professional Activities are tasks or responsibilities that can be entrusted to a trainee once sufficient competence is reached to allow for unsupervised practice. However, this concept has not been fully grasped by many stakeholders and lack of proper training before implementing EPAs. Hence, this workshop will address these issues.	Dujeepa Samarasekera Lee Shuh Shing Ardi Findyartini

Friday, October 19th, 2018

Day 1: Pre-conference workshop (PCW)

1-5 PM (Auditorium IMERI, 3rd floor)

Title	Short description	Resource persons/facilitators
PCW 4: Facilitating post graduate trainees' professional development through role modelling	The workshop will explore concept of role modelling and how it can nurture professionalism in postgraduate training.	Albert Scherpbier Nani Cahyani
PCW 5: Assessing trainees' through the use of portfolio	Utilizing portfolio in assessing trainees' competencies, strategies for implementing portfolio and how it can help assess as well as develop residents' professionalism and self-awareness.	Erik Driessen Gregorius Ben Prajogi Aulia Rizka
PCW6: Development of effective Continuing Professional Development programs	The importance of CPD and strategies to implement effective CPD programs.	Kiki Lombarts Milou Silkens

Saturday, October 20th, 2018

Day 1: Main conference

Time	Topic	Resource persons
07.30 – 08.00	Registration	
08.00 – 08.30	Opening ceremony Opening speech from the Dean of Faculty of Medicine Universitas Indonesia	Master of ceremony
08.30 – 09.30	Panel Discussion: From Partnership to Innovation: the role of Academic Health System	Panelist: 1. Albert Scherpbier (Ambassador of European AAHCI) 2. Ari Fahrial Syam

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Through Partnership and Innovation

Time	Topic	Resource persons
		(Ambassador of South East Asian AAHCI) Moderator: Budi Iman Santoso
09.30 – 09.45		
09.45 – 10.30	Plenary 1 Reflection on humanity in medical education	Speaker: Kiki Lombarts Moderator: Agus Purwadianto
10.30 – 11.45	Symposium 1 Lesson learned from partnership program: strengthening collaboration between medical school in Indonesia	Speakers: 1. Rita Mustika 2. Ova Emilia Moderator: Marcellus Simadibrata
11.45 - 12.45		
12.45 – 14.00	Symposium 2 Innovations to cultivate humanities and professionalism in health profession education	Speakers: 1. Ratna Sitompul 2. Irwin Aras Moderator: Pratiwi Sudarmono
14.00 – 15.30	Meet the expert MTE 1: Building research collaboration	Albert Scherpbier
	MTE 2: e-Portfolio	Erik Driessen
	MTE 3: Continuing Professional Development	Kiki Lombarts
15.30 – 17.00	Free Paper Presentation	

Sunday, 21stOctober 2018

Day 2: Main Conference

Time	Topic	Resource persons
08.00 – 08.30	Registration	
08.30 – 09.30	Plenary 2 Strengthening humanistic values of health professionals through Continuing Professional Development	Speaker: Albert Scherpbier Moderator: Dwiana Ocviyanti
09.30 – 10.00	Coffee break	
10.00 – 11.30	Panel Discussion Nurturing altruism in postgraduate training	Panelists: 1. David S. Perdanakusuma 2. Ari Fachrial Syam 3. Nancy Margarita Rehatta Moderator: R. Sjamsuhidajat
11.30 – 12.00	Best oral and poster presentation Closing ceremony and introduction of the 12 th Jakarta Meeting on Medical Education	

Organizing Committee

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Main Conference

Panel Discussion One

From Partnership to Innovation: The role of Academic Health System

Speaker : Prof. Albert Scherpbier, PhD
Prof. dr. Ari Fahrial Syam, SpPD-KGEH., MMB

Moderator : Dr. dr. Budi Iman Santoso, SpOG(K), MPH.

Curriculum Vitae

Professor Albert Scherpbier is Professor of quality promotion in Medical Education and Dean of the Faculty of Health, Medicine and Life Sciences and Vice Chair of Maastricht University Medical Centre. His Key interest in medical education are quality assurance professionalization of medical education, career prospects for medical teachers, involvement of medical students in improving the quality education, and medical education research. He has published extensive on medical education research. He published around 300 papers in international peer reviewed journals, 100 papers in national journals and around 70 chapters in books and conference proceedings.

He teaches courses on medical education research for the Maastricht School of Health Professions Education. He supervise national and international PhD students (S1 finished) and has been a consultant to medical schools in various countries, including Indonesia, Uganda, Nepal and Ghana.

He has been a driving force for curriculum innovation aimed at promoting integration of basic science and clinical science and teaching in realistic contexts. Professor Scherpbier is also involved in innovations in postgraduate specialist training. Besides his job as Dean he is also CEO pf Scannexus (a MRI facility with scanners up to 9.4)

Prof. dr. Ari Fahrial Syam, SpPD-KGEH., MMB born in Jakarta, June 19, 1966, is Dean of Faculty of Medicine, Universitas Indonesia and a staff from Division of Gastroenterology, Department of Internal Medicine, FMUI/Cipto Mangunkusumo Hospital (RSCM). He graduated from FMUI as MD in 1990. In 2000, he completed education as Internal Medicine specialist and being consultant in Gastroenterology Hepatology from Kolegium PB-PAPDI in 2005. Besides being a lecturer in FMUI/RSCM, Prof. Ari also remain engaged in clinical activities as a consultant Gastroenterology in RSCM, Thamrin Hospital, and Islam Pusat Jakarta Hospital. He often writes popular scientific articles for lay people in the print media, as well as actively talked for various

print media and TV. He also active as a researcher and has produced several scientific works published in national/international congresses and national/international magazines. He also actively involved in various professional organizations, including editor of The Indonesian Journal of Gastroenterology, Hepatology, and Digestive Endoscopy, managing editor of Acta Medica Indonesiana magazine, expert editor of Dokter Kita magazine, member of American College of Physicians, branch chairman (Jakarta) of Indonesia Gastroenterology Association, and Fellow of Indonesian of Internal Medicine (FINASIM).

Dr. dr. Dwiana Ocviyanti, Sp. OG(K), MPH is Vice Dean of Faculty of Medicine Universitas Indonesia (FMUI). She graduated as medical doctor in 1986, complete the Obstetricians and Gynecologist from Universitas Indonesia in 1995 and completed her PhD in the field of Clinical Epidemiology from Faculty of Public Health Universitas Indonesia in 2006. She was also the Educational Coordinator and Head of Educational Program of Obstetricians and gynaecologist in FMUI. She was also appointed as a Head of Training Program for Obstetrician and Gynecologist Specialist in FMUI. She has been actively involved as a member of Indonesian National Clinical Training Network in reproductive health. She has been involved in some research with the main focus of research in cervical cancer prevention in low resource setting and research in gynaecology infection.

Abstract

From Partnership to Innovation: The Role of Academic Health System

Prof. Albert Scherpbier, PhD

Academic health centers are in the unique position, that they can align the education of health care professionals, biomedical research and patient /population health to create a leading health system. They are unique positioned to lead health care transformation in the 21st century. More and more you see that they form networks with other hospitals and health care systems. AAHC is an organization that brings leaders in contact with each other to learn from each other. There are four regional offices (AAHCI). A South East Asia office in Jakarta, a Middle East and North Africa office in Beirut, a Latin America and the Caribbean office in Sao Paulo and an European office in Maastricht. To illustrate the role of an Academic Health

System the situation in Maastricht will be explained. The Maastricht University Medical Center is a close collaboration between the Academic Hospital and the Faculty of health Medicine and Life Sciences. We have a task in the region and want to prevent that patients enter our hospital through the organization of health care in the region. Examples will be explained.

From Partnership to Innovation: The Role of Academic Health System

Prof. dr. Ari Fahrial Syam, SpPD-KGEH., MMB

Improvements in health happen most readily when the education, research, and community health services integrate and come together. We called it as the *Tridharma* of Higher Education. Academic Health System (AHS) is an organisational network that consist of medical school, teaching hospital, research centres, and government, that become part of health-education system integration to provide best health outcomes to society through health education. AHS will produce transdisciplinary research that will impact to the continuous quality improvement for healthcare.

The last decade, there is a global spread of academic health system and a growing interest in the role of AHS in addressing health system. Historically, health care delivery was focused on the efforts of independent individual providers related to single patients, but in the future, it will require interprofessional teamwork to achieve successful transformation. As an organisation that pursue a “tripartite” mission to deliver high-quality care to patients, undertake clinical research, and train future health professionals, the collaboration will create some innovations.

The program will somehow encourage all of the medical students, residency program, postgraduate degree program, and doctoral program, to do more research that leads to the innovations and to give benefit to the social community as well as the institution itself. There is a real need for innovation in health care delivery, as well as in medicine, to address related challenges that we are faced. Health care environments must foster innovation, not just allowing it but actively encouraging it to happen anywhere and at every level in health care

Plenary One

Reflection on Humanity in Medical Education

Speaker : Prof. Kiki Lombarts

Moderator : Prof. Agus Purwadianto

Curriculum Vitae

Prof. Kiki Lombarts received her Master in Health Sciences from Erasmus University Rotterdam (1991), and her PhD from the University of Amsterdam, Faculty of Medicine (2003). She spent the past 25 years working in the field of professional performance of medical specialists. Her topics of interest include professionalism, performance assessment and improvement of clinicians and clinical teachers, faculty development, physicians' well-being and compassionate health care. Prof. Lombarts worked for different organizations within the Dutch health care system and took on different roles as researcher, independent consultant, coach, trainer and member of various hospital governance boards. Kiki Lombarts was involved and leading in various (inter)national and local (quality management) initiatives in both patient care and postgraduate medical education. Currently Kiki Lombarts is the chair of the Professional Performance research group at the Amsterdam University Medical Center (Amsterdam UMC), the Netherlands, where she supervises and collaborates with a fun team of PhD candidates and postdocs. She is the chair of the Educational Committee of the Amsterdam UMC Graduate School, and co-chair of the Educational Quality Committee of the Amsterdam Public Health research institute. She is also is member of the Gender & Health program committee of the Netherlands Organization for Health Research and Development. She is a widely invited (inter)national lecturer and has published approx. 100 peer reviewed (PubMed indexed) papers in the area of professional performance, i.e. on the development and validation of measurement tools, peer review, feedback, professionalism, work engagement and performance change.

Prof. Agus Purwadianto, a senior lecturer and professor in Department of Forensic Medicine and Medicolegal Studies, Faculty of Medicine, Universitas Indonesia, Jakarta. Pioneer of Bioethics and Health Humanities as majoring topic of PhD program at FMUI. Vice Chair of National Bioethics Commission, one of the founders of The Network of The Indonesian Medical Bioethics and Humanities (JBHKI). Pioneer & Chair of The Indonesian Health

Researchers Association (APKESI). He is Chair of National Clinical Advisory Board under Ministry of Health, solving the claim and complaint disputes among health providers – patients – Health Branch of National Social Security Board (BPJS Kesehatan) and member of Indonesian Medical Disciplinary Board (MKDKI). He got a MD degree, Forensic Medicine specialist, bachelor of Law, Master of Sciences in Sociology majoring in Criminology and PhD in Philosophy respectively from Universitas Indonesia. Former the Head of Legal & Organization Bureau, former DG of National Institute of Health Research and Development and Senior Advisor to Minister of Health for Health Technology and Globalization, Ministry of Health consecutively. He is a national delegates of yearly APEC Business Ethics Forum discussing about Mexico City Principles and its implementations since 2010

Abstract

Reflection on humanity in medical education

Prof. dr. Kiki Lombarts

Amsterdam University Medical Centers, University of Amsterdam,
Amsterdam, the Netherlands

High quality patient care requires high performing physicians. Physicians' professional performance can be defined as what doctors are actually seen to do in (daily) practice. Good performance is reflected in the so-called 3 pillars of professional performance: 1. the constant pursuit for excellence, 2. humanistic practice and 3. giving account of one's professional actions. (Lombarts, 2016) Being a good doctor means that physicians should embrace these so called three pillars of professional performance. Physicians express that the second pillar, 'humanistic practice', is at the heart of their profession, referring to it in terms of 'their calling' or 'their reason to become a doctor'. Core of physicians' humanistic practice is the clinical encounter between doctor and patient. Clearly, physicians must bring empathy and compassion to any such encounter. However, literature reviews report that empathy and compassion levels are declining during medical school and residency training. This is harming patient care as well as the well-being of health care professionals; both will be discussed in this plenary. For the sake of high quality patient care and a sustainable clinical workforce, humanities in health profession education should aim to bring back the human to human elements of healthcare delivery.

Symposium One

Lesson Learned from Partnership Program: Strengthening Collaboration Between Medical School in Indonesia

Speaker : Prof. Ova Emilia ; dr. Rita Mustika, M.Epid

Moderator : Prof. dr. Marcellus Simadibrata, PhD., SpPD-KGEH

Curriculum Vitae

Dr. Mei Neni Sitaresmi, PhD, Consultant Pediatrician, is currently the Vice Dean for Collaboration, Alumni and Community Service Faculty of Medicine, Universitas Gadjah Mada. Her medical training was at Universitas Gadjah Mada, Yogyakarta, Indonesia, followed by specialist training at the same institution on 2002. She received her consultant on Growth Development-Social Pediatric from Indonesian Pediatric Society on 2008. She graduated her PhD in VUMC Amsterdam, the Netherland. She is a member of International Society of Social Pediatric and Child Health (ISSOP), member of International Society of Pediatric Oncology (SIOP), member of Indonesian Task Force on Immunization, the head of Yogyakarta Committee on Adverse Event Following Immunization and Indonesian Pediatric Society Working Group on Growth development- Social Pediatric. Her research interests are in the fields of pediatri Social (Immunization, Quality of life, compliance), and Child behavioral-development,. She was awarded the Best of 2010 Schweisguth Price Applications, at The International Society of Pediatric Oncology (SIOP) in Boston US and as the 2013 Lecturer of the year at The Faculty of Medicine, Universitas Gadjah Mada

dr. Rita Mustika, M.Epid is a lecturer at Department of Medical Education FMUI since 2007, clinically trained in graduate school of dermatology at Kobe University in 2005 and took her master epidemiology in FMUI at 2010. She is responsible in organizing and teaching research methodology and teaching-learning module for master of medical education program, Adult learning module, Humanism, professionalism and Cultural competency module and Empathy, Ethics, and Professionalism module for undergraduate medical program, as well as faculty development program in AHS UI and nationally. Her main area of interest and research are in the field of teaching-learning, faculty development, tracer study, humanity-professionalism, and clinical teacher. Currently she is coordinator of

collaboration in medical education Indonesia Medical and Research Institute (IMERI) FMUI.

Prof. dr. Marcellus Simadibrata, PhD., SpPD-KGEH has been involved in medical education since his early years as a faculty staff in the Department of Internal Medicine as a member of department coordinator of undergraduate medical education. He is also of the staff and professor of division Gastroenterology department of Internal Medicine FMUI/ Dr. Cipto Mangunkusumo Hospital Jakarta. He is active as an editor staff of journal of internal medicine (Acta Medica Indoensiana) and The Indonesian Journal of Gastroenterology, Hepatology and Digestive Endoscopy. He is also still active as the President of Indonesian Society of Gastroenterology since 2011 and an advisor of The Indonesian Society of Digestive Endoscopy. He is active as one of the member of Indonesian Collegium of internal medicine and as the supervisor of gastroenterology fellowship school (Sp2) in Dr. Cipto Mangunkusumo Hospital/ FMUI.

Abstract

Strengthening Collaboration Between Medical School in Indonesia

dr. Mei Neni , PhD & Prof. Ova Emilia

Collaboration is a powerful vehicle to promote development of medical schools in Indonesia. Each of school has own uniqueness and excellence. Collaboarion among different schools can help to maintain a dynamic institutional climate that sustains good faculty and ultimately promotes a healthy learning environment for students.

There are many challenges when starting a collaboration because whenever people or organizations come together, conflict is bound to surface. The most common challenges of collaboration revolve around cultural differences, finding common interest and goals, time, geographic constraints, and power differences present in the group

In the presentation, I will present different format of collaborations among medical school in Indonesia. Students exchange, staff, apprenticeship, multisite research, and community service.

From these experiences we have found four key elements common to successful collaborations: trust, communication, a sense of shared interest and goals, and defined and clear expectations and roles.

Lesson learned from partnership program: strengthening collaboration between medical school in Indonesia

dr. Rita Mustika, M.Epid

Educating physician is a nurturing process. Involving science and art of medicine. Therefore, experienced and resourceful medical schools are needed. One of good practice in medical education in Indonesia is an established medical school fostering education process of the new one. Faculty of medicine Universitas Indonesia (FMUI) with centuries experiences in educating physician has been fostering new medical school since years ago.

Up until recently Indonesia has not yet reach optimum doctor-patient ratio. Furthermore, uneven distribution of doctor also worsens the condition. New medical school continue mushrooming. FMUI was assign to foster the development of several new medical school in this last decade. There were four medical school fostered by FMUI through medical school fostering unit during 2009-2014 period. Currently FMUI fostering faculty of medicine, University of Papua that was established in 2014 in West Papua island.

Fostering process begin with agreement between two institution and district authority on establishing new medical school. Preparation, implementation, and development phase included in fostering process. During preparation period, FMUI highly involved in student selection process, developing a suitable curriculum, recruitment of teaching and administrative staff, faculty development, and preparing the facilities. Right after the new medical school gain operational permission, the implementation process began. FMUI assign fostering team to reside in medical school location and manage the education process while developing the local faculties. Local faculties will be given responsibility to manage and teach gradually. Besides the curriculum implementation, FMUI also build networking with local stake holder including health care facilities and

community leaders to support students learning, especially for community attachment and clinical rotation.

Challenges of fostering program were mostly communication and political situation in the local setting. Solution for the problem including innovating communication access, understanding local socio-political situation, and sometimes need involvement of third party. Quality assurance and development of the new medical school toward an established medical school is an ultimate goal of this foster ship program. Collaboration between two medical school were built gradually in education, research and services.

Symposium Two

Innovations to Cultivate Humanities and Professionalism in Health Profession Education

Speaker : Dr. dr. Ratna Sitompul, SpM(K)

dr. Irwin Aras, M.Epid., M.MedEd

Moderator : Prof. dr. Pratiwi Sudarmono, SpMK, PhD.

Curriculum Vitae

Dr. dr. Ratna Sitompul, SpM(K) born in Jakarta, February 6, 1961, is a staff in Department of Eye Health Sciences Faculty of Medicine University of Indonesia/RSCM. She was a Dean of Faculty of Medicine University of Indonesia (FMUI) since 2008-2017. She earned her MD from FMUI in 1990. In 1994, she completed specialty in the science of eye disease from FMUI and earned a doctorate in 2005. She has completed several trainings in educational program such as Pelatihan Staf Pengajar untuk Pelaksanaan Kurfak FKUI, AA-Pekerti, Sertifikasi Pendidik/ Dosen, Training Field coaches: Program Penguatan Kapasitas Pemimpin Indonesia and Pelatihan Penguji Nasional Ilmu Kesehatan Mata. She has published many scientific publications nationally and internationally since 1986. She initiated Community Service in Ophthalmology which involved students of FMUI in Perokonda and Perobatang Village, Southwest Sumba and Program Kesehatan Mata untuk Murid Sekolah Dasar in Cibitung Wetan Village, Bogor.

dr. Irwin Aras, M.Epid., M.MedEd, After finishing a doctor degree from Hasanuddin University in Makassar in 1999, then became a lecturer in the Department of Community Medicine, Faculty of Medicine, Hasanuddin University since 2002. Continuing education and obtaining a master's degree in epidemiology from the University of Indonesia in 2007 and a master in medical education from the University Gadjah Mada in 2013. Working as a member of an interprofessional education (IPE) activity, namely Community Service Program for Health Professional Students since 2004 until finally trusted to be the program's chairman from 2008 to present. Also became a speaker for several trainings and workshops on medical education, especially related to student assessment, teaching and learning and interprofessional education. Becoming a member of the national committee on competency test for medical students (PNUKMPPD) and national consortium interprofessional education and collaboration (IPEC).

Prof. dr. Pratiwi Sudarmono, SpMK, PhD. born in Bandung, Juli 31st 1952. She is a lecture in Microbiology Department at Faculty of Medicine Universitas Indonesia. She earned her medical degree from the Faculty of Medicine Universitas Indonesia in 1976 and then received her PhD in Molecular Biology from Osaka University, Japan. After returning from Japan, in 1985 she went to Johnson Space Center, USA to follow trainings and earn the payload Specialist Astronaut certificate. Finally, in 1992 she attained recognition as a Clinical Microbiology Specialist. In February 2008 she was appointed as Honorary Professor of Microbiology Science in Faculty of Medicine Universitas Indonesia. Prof. Pratiwi's primary interest has been clinical microbiology, especially emerging and re-emerging infectious diseases. Her recently research was about Antiviral effect of *Archidendron pauciflorum* leaves extract to hepatitis C virus: an *in vitro* study in JFH-1 strain. She got an Bintang Jasa Pratama achievement from President of Republic Indonesia in 1997 and Life Achievement Award from Hari Merdeka in 2016. She is now actively as a member from Indonesia in Track II Multilateral dialogue on Health Biosecurity, between USA, Singapore, Malaysia, Thailand, Philippines and Indonesia.

Abstract

Innovations to Cultivate Humanities and Professionalism in Health Profession Education

Dr. dr. Ratna Sitompul, SpM(K)

WHO realizes there are weaknesses in health care system in order to achieve SDG. SDG could be achieved with a good teamwork between intra and intersectoral. Medical ethic and humanity become important to taught to students to cope with challenges in health care system, social-economic or even cultural problems. An example to teach humanity is doing community service with the involvement of the students. We took ocular problem as our main topic because 1.5% of Indonesian population suffered from blindness therefore Indonesia has the highest rate of blindness in Southeast Asia. Southeast Nusa Tenggara has high prevalence of blindness (1.0%) and cataract became the main problem (2.3%). Southwest Sumba was chosen because it is an underdeveloped area without ophthalmologist care. Our community service divided into 3 phases, defining ocular problems in the community, patient selection and performing surgical intervention for cataract and early detection by performing examination of ocular problems in children. We examined 667 residents and found that presbyopia (30.8%) and cataract (12.8%) are the most common ocular problems in the community. Cataract surgery was performed in 109 population and 52.3% of the population had better visual acuity after the surgery. We examined 337 children for early detection of ocular problems and about 4.5% had ocular problems. We worked with local government such as district major, public health officers, head of the village, teachers and parents to participate in this service. This service involved 4 ophthalmologists, 2 undergraduate students, 2 ophthalmology residents and 2 refractionists from FKUI-RSCM.

Teaching humanities and professionalism through community service program for health professions student in University Hasanuddin with IPE approach

dr. Irwin Aras, M.Epid., M.MedEd

“To most physicians, my illness is a routine incident in their rounds, While for me it’s the crisis of my life. I would feel better if I had a doctor who at least perceived this incongruity” (Anatole Broyard, former New York Times critic)

Teaching humanities and professionalism aspects to medical students today, is not a new issue. The Faculty of Medicine is required to produce doctors who have a helpful culture, empathy, altruism, respect differences, be able to work together and recognize the social and cultural aspects of the community. The Faculty of Medicine of Hasanuddin University, Makassar since 2002 has run community service program for health profession students with inter professional education (IPE) approach (Kuliah kerja Nyata Profesi Kesehatan or KKN PK). Students from 7 health profession study programs (medicine, dentistry, nursing, pharmacy, public health, nutrition and physiotherapy) are attached in community for 7-8 weeks under supervised by a faculty staff as facilitator. They learn about how the diseases emerge in the community, and also how to cope it through a series of activities, since data collection, determining priority issues, designing intervention measures, until evaluating programs. Therefore, students must recognize the community well so that they are able to appreciate the cultural values and differences in the society, and collaborate to help overcome public health problems based on their professional knowledge. In addition, they must develop effective communication skills with fellow students and community members to participate in every program implemented. To assess the achievement of program objectives, several assessment methods were implemented, such as self-reflection, peer assessment, rubrics, facilitator and host assessment, and final report.

Plenary Two

Strengthening Humanistic Values of Health Professionals Through Continuing Professional Development

Speaker : Prof. Albert Scherpbier, PhD

Moderator : Dr. dr. Dwiana Ocviyanti, Sp.OG(K), MPH

Curriculum Vitae

Professor Albert Scherpbier is Professor of quality promotion in Medical Education and Dean of the Faculty of Health, Medicine and Life Sciences and Vice Chair of Maastricht University Medical Centre. His Key interest in medical education are quality assurance professionalization of medical education, career prospects for medical teachers, involvement of medical students in improving the quality education, and medical education research. He has published extensive on medical education research. He published around 300 papers in international peer reviewed journals, 100 papers in national journals and around 70 chapters in books and conference proceedings.

He teaches courses on medical education research for the Maastricht School of Health Professions Education. He supervise national and international PhD students (S1 finished) and has been a consultant to medical schools in various countries, including Indonesia, Uganda, Nepal and Ghana.

He has been a driving force for curriculum innovation aimed at promoting integration of basic science and clinical science and teaching in realistic contexts. Professor Scherpbier is also involved in innovations in postgraduate specialist training. Besides his job as Dean he is also CEO of Scannexus (a MRI facility with scanners up to 9.4)

Dr. dr. Dwiana Ocviyanti, Sp.OG(K), MPH is Vice Dean of Faculty of Medicine Universitas Indonesia (FMUI). She graduated as medical doctor in 1986, complete the Obstetricians and Gynecologist from Universitas Indonesia in 1995 and completed her PhD in the field of Clinical Epidemiology from Faculty of Public Health Universitas Indonesia in 2006. She was also the Educational Coordinator and Head of Educational Program of Obstetricians and gynaecologist in FMUI. She was also appointed as a Head of Training Program for Obstetrician and Gynecologist Specialist in FMUI. She has been actively involved as a member of Indonesian National

Clinical Training Network in reproductive health. She has been involved in some research with the main focus of research in cervical cancer prevention in low resource setting and research in gynaecology infection.

Abstract

Strengthening Humanistic Values of Health Professionals Through CPD

Prof. Albert Scherpbier, PhD

A medical doctor has a training from around ten years. After he/she is a specialist, he/she will work around 40 years. Since many things and certainly in health care change very fast, it would be logic that there is education and training in these 40 years. In many areas in the world, it has become clear that it is not that easy to organize. Many countries have a credit point system and ask for the registration that a certain number of points have to be obtained to keep the registration as specialist. On the other hand, we know that specialists have a tendency to choose topics in CPD that they already know something about. In order to incorporate humanistic values (altruism, integrity and self-awareness) in a CPD program participants need feedback. We know that most of us do not have a good picture of ourselves; usually we need others to find out how we are and what we need to improve. There are different ways how to realize this feedback. Essential is a safe culture. In the Netherlands, that has changed a lot the last ten years. Doctors ask for feedback from their residents and other health care workers. Of course, that has to be organized. Working in small groups and discussing real cases is another way to learn the importance of humanistic values.

Panel Discussion Two

Nurturing Altruism in Postgraduate Training

Speaker : Prof. Dr. David S Perdanakusuma, dr., Sp..BP-RE(K)
Prof. dr. Ari Fahrial Syam, SpPD-KGEH., MMB
Prof. Dr. dr. Nancy Margarita Rehatta, Sp.AnK.IC

Moderator : Prof. dr. R. Sjamsuhidayat, Sp.B.KBD

Curriculum Vitae

Prof. Dr. David S Perdanakusuma, dr., Sp..BP-RE(K) born in Singkawang, March 5, 1960, is Vice Dean of Faculty of Medicine, Universitas Airlangga. He graduated from Faculty of medicine Universitas Padjadjaran, Bandung as MD in 1988. In 1997, he completed education as plastic surgeon specialist and being consultant in plastic surgeon from Kolegium Ilmu Bedah Plastik Indonesia in 2006. Besides being a lecturer in FMUI/RSCM, Prof. David actively involved in various professional organizations including “Perhimpunan Ahli Bedah Plastik Indonesia (PERAPI)”, “Perhimpunan Ahli Bedah Indonesia (IKABI)”, American Wound Healing Society (WHS), and International Society of Aesthetic Plastic Surgery (ISAPS).

Prof. dr. Ari Fahrial Syam, SpPD-KGEH., MMB born in Jakarta, June 19, 1966, is Dean of Faculty of Medicine, Universitas Indonesia and a staff from Division of Gastroenterology, Department of Internal Medicine, FMUI/Cipto Mangunkusumo Hospital (RSCM). He graduated from FMUI as MD in 1990. In 2000, he completed education as Internal Medicine specialist and being consultant in Gastroenterology Hepatology from Kolegium PB-PAPDI in 2005. Besides being a lecturer in FMUI/RSCM, Prof. Ari also remain engaged in clinical activities as a consultant Gastroenterology in RSCM, Thamrin Hospital, and Islam Pusat Jakarta Hospital. He often writes popular scientific articles for lay people in the print media, as well as actively talked for various print media and TV. He also active as a researcher and has produced several scientific works published in national/international congresses and national/international magazines. He also actively involved in various professional organizations, including editor of The Indonesian Journal of Gastroenterology, Hepatology, and Digestive Endoscopy, managing editor of Acta Medica Indonesiana magazine, expert editor of Dokter Kita magazine,

member of American College of Physicians, branch chairman (Jakarta) of Indonesia Gastroenterology Association, and Fellow of Indonesian of Internal Medicine (FINASIM).

Prof. Dr. dr. Nancy Margarita Rehatta, Sp.AnK.KNA,KMN is a senior lecture of Department of Anesthesia and Intensive Therapy in Faculty of Medicine Universitas Airlangga. She earned her medical degree from Medical School, Universitas Airlangga in 1976 and then received her Doctoral Degree from Doctoral Program of Universitas Airlangga in 1999. She is a Consultant in Neuro Anesthesia and Critical Care recognized and Consultant in Pain Management recognized by Indonesian College of Anesthesiology and Intensive Therapy. She is now actively as a member of Indonesian Society of NeuroAnesthesia and Neuro Critical Care and of course as a member of Asian Society of NeuroAnesthesia and Neuro Critical Care too. In 2013, She got Satya Medika Airlangga Achievement from Airlangga University. Now, she is a President of Indonesia College of Anesthesiology and Intensive Therapy and President of Asian Society of PBL in Higher Education and Health Science until 2020. She is appointed to be a Chairman of Medical Education, Research and Staff Development Unit, Faculty of Medicine Universitas Airlangga until 2020.

Prof. dr. R. Sjamsuhidayat, Sp.B.KBD born in 1931, he is emeritus professor of surgery at Faculty of medicine Universitas Indonesia. Interested in medical education including specialist training. He became the first head of Department of Medical Education at FMUI. Serving as chairman of Ethical Review Board for medical research for many years at the same school medicine, he gained experience in research ethics, and insight of many aspects of medical ethics, medical humanities and medical law.

Abstract

Nurturing Altruism in Postgraduate Training

Prof. Dr. David S. Perdanakusuma, dr., SpBP-RE (K)

“I will dedicate my life to interests of humanity and I will prioritize the health of patients by caring for the people’s needs,” is part of the statement in the Indonesian Medical Doctor’s Oath. This statement demonstrates that altruism, the giving of life for the sake of others, should dominate the medical profession. Altruism itself takes root in compassion and is an

attitude which can and needs to be exercised. The basics of altruism are introduced during the period of academic education and should progress markedly during the period of profession education/clinical rotations so that this character transforms into part of professionalism framework. During the profession medical education, specialist and subspecialist training program, altruism remains an integral component through various activities. In an integrated process of patient healthcare during profession training, the students practice empathy as they examine, accompany, perform procedures and make various assessments for the purpose of helping to meet patients' needs. One reflection of daily altruistic training is dedicating one's whole time during night shifts for the sake of others, even if this is done as part of the training program. Various efforts to develop skills and knowledge in the medical profession, by participating in symposiums, seminars, workshops and trainings, basically are altruistic activities considering the objective would be to provide improved quality of health care for the benefit of patients. However, if altruism is not upheld, then it will slide and transform into commercialism unawares. Nurturing altruism in the professional education should be integrated with professionalism training. Therefore, an educational environment which is altruistic and reflective needs to be established to catalyze this process.

Nurturing altruism in postgraduate training

Nancy Margarita Rehatta

Altruism is an attitude to pay attention on other's well-being without concerning the self (Baston, 1987)

Both beneficence and altruism overlap to the extent that they are motivated by concern for others. Yet beneficence prescribes an obligation to act in a certain way, whereas altruism prescribes no obligation but is instead optional and beyond the call of duty. In addition, altruism is directed toward individuals to whom one has no special ties and therefore no special obligations. But physicians have a special relationship with their patients, and this relationship does create specific duties, such that in their routine clinical practice, physicians are not altruistic. Physicians are not and cannot be altruistic in their daily encounters with patients precisely because they are acting within a professional relationship, and professionalism entails obligations to specific others, in particular, their patients. Altruistic behavior cannot be artificially developed, but luckily it is within our nature as doctors

to put the needs of others at the front of our thoughts. However, this desire to serve others must be encouraged to develop and be matured from early years as medical students until as doctors through their career. Altruistic behavior by physicians might include, for example, continuing to work or providing informal medical advice outside contracted hours, giving free treatment to poor patients in fee for service healthcare systems, and a general willingness to go the extra mile in professional activities. There is much evidence that many doctors work beyond their contracted hours, but there is also a growing feeling that altruism in medicine, if not dying, is at least declining. This might be expressed, for example, in the anesthetist's unwillingness to accept a final case on the list because the operation would run beyond the limit of the contracted session; decline in home visiting rates by general practitioners; or in the recent explicit choices now made by young doctors in balancing professional and domestic commitments. Generation "now" is making a cool appraisal of the costs and benefits of a medical career. Nurturing altruism to post grade training need minimal 2 important points namely

1. Altruism attitude of the teacher self. Teachers need to pay more attention on their students' well-being rather than their personal well-being. Altruism, based on Batson (1987) consider motivations for benefiting others, altruism is a way that includes benefiting another as a means to benefit oneself, as long as the self-benefits are internally rather than externally administered
2. Role modeling are important to the development of professional values include altruism . Despite institutional efforts to improve professionalism, medical students often receive mixed messages. Contrary to the fact that schools are increasingly teaching about the importance of professionalism. On the other hand, students regularly observe unprofessional behavior.

"An academic who only presents facts is not a teacher; a teacher is one who nurtures the learning process and there by modifies behavior and patterns of thinking for a lifetime."

–Woosley, 1997

Nurturing altruism in postgraduate training

Prof. dr. Ari Fahrial Syam, SpPD-KGEH., MMB

Objective's in medical postgraduate is to provide fundamental and advanced knowledge and also expertise. Another important thing in the medical profession is altruism, which makes a doctor serve without the expectation of return. Altruism is known as acts of goodwill for the well-being of others, without any selfish intent. It has been a primary virtue of medical practice over the years. It is also known that many medical doctor has the tendencies by working towards the welfare of the patient beyond duty hours, sacrificing their break time for the sake of patients, providing treatment free of cost to the poor, and risking their health to provide services during outbreaks of disease.

Medicine is one of the few professions which is supposed to be dominated by unselfish motives. Altruism among doctors, though not an obligatory professional virtue, may play a role in shaping the typical characteristics of the doctor-patient relationship. With the vision of integration, professionalism, collaboration, and care, most of the medical trainers are exposed with many cases that they have to treat the patient with limited facility, cost benefit and also supported by the evidence based.

Nowadays, the majority of the patient in Indonesia is covered by the national insurances that is known as the BPJS (Social Insurance Administration Organization). Most of them come from the community with a low level of economic and education. So in this condition, it is a good place for the trainers to do health promotion in order the create awareness in the community. In general, it will encourage the trainers to nurture care and altruism in their everyday activity.

*Pre-Conference
Workshop*

PRE- CONFERENCE WORKSHOP I

ASSESSMENT OF TEAMWORK IN INTERPROFESSIONAL EDUCATION: A CONTEXTUAL APPROACH

Dr. Vishna Devi Nadarajah, PhD, dr. Diantha Soemantri, MMedEd, PhD

Dr. Vishna Devi Nadarajah, PhD is Associate Professor and Associate Dean of Teaching and Learning at International Medical University (IMU), Malaysia. She obtained her PhD from the University of Cambridge and was awarded national and international research grants for her research on *Bacillus thuringiensis* proteins and biomarkers for neuromuscular disorders. She has supervised, published and presented 54 research and medical education. Dr. Vishna was an elected Committee Member of Chevening Alumni Malaysia, panel member for “Anugerah Akademik Negara” and the safety committee for Standards Malaysia on Microbial Research. She has been continuously involved in curriculum development, having played a key role in the development of Problem Based Learning and new programmes in IMU.

dr. Diantha Soemantri, MMedEd, PhD is a senior lecturer in medical education in the Department of Medical Education, Faculty of Medicine Universitas Indonesia. Graduated as a medical doctor from Faculty of Medicine Universitas Indonesia in 2005, acquired Master in Medical Education from University of Dundee in 2007 and a PhD in the same field from University of Melbourne in 2013. She is now a Vice Director of Medical Education in Indonesian Medical Education and Research Institute (IMERI) and also responsible for the integrated curriculum of Health Sciences Cluster. She has published several journal articles both nationally and internationally and participated as invited speakers in International conferences on medical education. Her research interest are reflection and feedback, interprofessional education and student assessment.

Background

Interprofessional education (IPE) is aimed to equip medical and health professions students with the ability to work in healthcare teams to deliver patient-centered care, also known as interprofessional practice (IPP). As with any other competencies, the hierarchy from 'knows', 'knows how', to 'shows' and then 'does' (Miller's pyramid) can be used to design the assessment system. The assessment of teamwork competency may start from evaluating students' understanding of teamwork theory (cognitive domain) through written test until observing students' actual ability in real clinical settings (workplace-based assessment). As every higher education institution have contextual strengths that will enable implementation of IPE and related assessments, there are also contextual barriers that may hinder implementation. This workshop will take a comprehensive approach in addressing IPE assessments and facilitating implementation based on contextual needs

Objectives

At the end of the workshop, the participants are able to:

1. Describe both the relationship and differences between IPE and IPP
2. Explain the principles of student assessment in IPE program
3. Identify different methods and instruments for IPE, including assessing students' teamwork ability, specific competencies of other professions and patient centred care.
4. Prepare a blueprint for assessing students in IPE program

Scope of discussion

1. Concepts of IPE, IPP and Principles of assessment
2. Domains of competency in IPE
3. Assessment blueprint in IPE

Activities (210 minutes)

Time	Session
10 minutes	Icebreaking
10 minutes	Introduction to the workshop
25 minutes	Group work: Discussing the competency domains in interprofessional education and collaborative practice

Time	Session
20 minutes	Sharing contextual enablers and challenges
20 minutes	Group work: Discussing the principles of assessment
15 minutes	Sharing assessment tools used to address contextual needs
15 minutes	Interactive lecture: Assessing the teamwork competency of medical and health professions students
10 minutes	Q&A
30 minutes	Group work: Developing an assessment blueprint
30 minutes	Exercise in assessing competencies (using case studies)
20 minutes	Debriefing
5 minutes	Wrap up and closing

Maximum number of workshop participants

30 participants.

Reading materials

1. Curran V et al. Interprofessional Collaborator Assessment Rubric. Academic Health Council, Canada.
2. Interprofessional Education Collaborative Expert Panel. (2011). *Core competencies for interprofessional collaborative practice: Report of an expert panel*. Washington, D.C.: Interprofessional Education Collaborative.

List of workshop facilitators

1. Vishna Devi Nadarajah (Resource person)
2. Diantha Soemantri (Facilitator)

Specific requirements

(the organizing committee will prepare a set of standard audiovisual equipment – laptop, LCD projector and microphone, and please list any additional requirements necessary such as flipchart, markers, sticky notes, additional computer speakers, round table seating arrangement, etc.)

1. Flipchart and markers
2. Sticky notes (several colours)
3. Round table seating arrangement

Short description (summary) of the workshop

Interprofessional education is aimed to equip medical and health professions students with the ability to work in a healthcare team in delivering patient-centered care. As with any other competencies, the hierarchy from 'knows', 'knows how', to 'shows' and then 'does' (Miller's pyramid) can be used to design the assessment system. The assessment of competencies related to IPE and ultimately interprofessional practice includes recognising specific and shared competencies of health professionals, practicing teamwork competency which may start from evaluating students' understanding of teamwork theory (cognitive domain) through written test until observing students' actual ability in real clinical settings (workplace-based assessment). Depending on the learning outcomes of the IPE program, an appropriate assessment blueprint will be developed during the workshop. Special focus will be given to implementation of IPE assessment based on contextual needs, this includes the assessment of teamwork skills in simulated and real clinical settings based on resources available: assessing the validity and reliability of these tools, and how best use them and under what kind of circumstances to address contextual needs.

PRE- CONFERENCE WORKSHOP II

CULTURE COMPETENCE

Dr. Gominda Ponnampereuma, dr. Rita Mustika, M.Epid

Dr. Gominda Ponnampereuma MBBS (Colombo), Dip. Psychology (Colombo), MMed (Dundee), PhD (Dundee)
Assistant Director Centre for Medical Education
National University of Singapore

He has served as an invited speaker cum resource person in many international symposia and conferences. Author of several journal articles and books he sits on the editorial boards of two international medical education journals. He has been a postgraduate tutor and resource material developer for national and international medical education courses. He has also served as an examiner in medical education certificate, diploma,

master's and doctoral degree programmes in many consultant and fellow in academic institutes and educational projects in several country. He is a founder co-chair of the Asia Pacific Medical Education Network (APME-NET). His research interest are in assessment (including selection for training), and curriculum development and evaluation.

dr. Rita Mustika, M.Epid is a lecturer at Department of Medical Education FMUI since 2007, clinically trained in graduate school of dermatology at Kobe University in 2005 and took her master epidemiology in FMUI at 2010. She is responsible in organizing and teaching research methodology and teaching-learning module for master of medical education program, Adult learning module, Humanism, professionalism and Cultural competency module and Empathy, Ethics, and Professionalism module for undergraduate medical program, as well as faculty development program in AHS UI and nationally. Her main area of interest and research are in the field of teaching-learning, faculty development, tracer study, humanity-professionalism, and clinical teacher. Currently she is coordinator of collaboration in medical education Indonesia Medical and Research Institute (IMERI) FMUI.

Background

When delivering healthcare in a society with patients having diverse needs and expectations, it is crucial that the healthcare professional is culturally competent. The reason for this is if issues related to cultural competence are not addressed appropriately the patient outcomes will be compromised. Hence, the importance of ensuring that every future healthcare professional is sensitive to the issues related to cultural competence. As such, it is an absolute necessity that the health professions educator is not only aware of the nuances of cultural competence, but also competent to teach and assess cultural competence.

Objectives

At the end of the workshop, the participants will be able to:

1. Define cultural competence
2. Explain the importance of cultural competence
3. Apply the frameworks for identifying and eliciting issues related to cultural competence in practice

4. Discuss how cultural competence can be incorporated into teaching/learning and assessment.

Scope of discussion

The scope of the discussion will cover all healthcare professions and healthcare professions education programmes.

Activities

Time	Session
8.00	Introduction to the workshop
8.15	What is cultural competence?
8.30	Why cultural competence?
9.00	How to elicit issues related to cultural competence?
9.30	Group work: participants tackling scenarios with cultural competencies
10.00	Tea/Coffee
10.15	Group work (continued): participants tackling scenarios with cultural competencies
10.30	Presentation of group work
11.15	How to teach cultural competence?
11.30	How to assess cultural competence?
11.45	Question and answers
12.00	End of workshop

Please note that the above timing is approximate. The timing will change based on the needs of the participants.

Maximum number of workshop participants

30 participants.

Reading materials

1. Saha S, Beach MC, Cooper LA. Patient centeredness, cultural competence and healthcare quality. J Natl Med Assoc. 2008 Nov;100(11):1275-85.
2. Gallagher RW, Polanin JR. A meta-analysis of educational interventions designed to enhance cultural competence in professional nurses and nursing students. Nurse Educ Today. 2015; 35(2):333-40. doi: 10.1016/j.nedt.2014.

List of workshop facilitators

1. Gominda Ponnampereuma (Resource person)
2. Rita Mustika (Facilitator)

Specific requirements

1. Laptop with Windows and PowerPoint compatibility for the resource person
2. Five round tables, each having seating facilities for 6 participants
3. One flip chart and marker pens for the resource person/facilitator, and a flip chart and marker pens beside each participant table; i.e. six flip charts in all.
4. Depending on the acoustics of the venue a microphone for the resource person may or may not be necessary. Please check acoustics and arrange accordingly.

Short description (summary) of the workshop

Given the influence that a culturally competent healthcare professional could have on the achievement of optimum patient outcomes, it is vital that every healthcare professional practising in a society with diverse patient needs and expectations is competent in handling issues related to cultural competence. This workshop will interactively explore with the participants: what is cultural competence in relation to modern healthcare delivery; why is it so important; what are the frameworks available to handle issues related to cultural competence; how to apply these frameworks in practice; and how could cultural competence be incorporated into teaching/learning and assessment of health professions education programmes? All healthcare professions educators, practitioners and administrators could benefit from the activities and deliberations of this workshop.

PRE- CONFERENCE WORKSHOP III

ENTRUSTABLE PROFESSIONAL ACTIVITIES (EPA) AND EFFECTIVE SUPERVISION FOR POSTGRADUATE HEALTH PROFESSION EDUCATION PROGRAM

Dr. Dujeepa D. Samarasekera, Dr. LEE Shuh Shing, dr. Ardi Findyartini, PhD

Dr Dujeepa D. Samarasekera is the Director, Centre for Medical Education, Yong Loo Lin School of Medicine, National University of Singapore. Dujeepa has been involved in curriculum planning, evaluation, and student assessment at both undergraduate and postgraduate level health professional education courses.

Dujeepa serves on the editorial advisory boards of South East Asian Journal of Medical Education (SEAJME), Korean Journal of Medical Education and is a peer reviewer for Medical Teacher, Medical Education, Annals of Academic Medicine, Singapore Medical Journal, Asia Pacific Journal of Public Health and serves as faculty to local and international health professional education programs.

He is also the Vice-President of the Western Pacific Association for Medical Education (WPAME) and a board member of Asian Medical Education Association, AMEE Ambassador and member of ASPIRE panel for Medical School Assessment and Faculty Development, and Asia Pacific Network for Scholarship in Medical Education (APNetSME).

His main research interests are in effective teaching/learning behaviours and assessment and has published in peer reviewed journals as well as authored book chapters relating to Medical and Health Professional Education.

Dr Lee Shuh Shing is a medical educationalist in Centre for Medical Education (CenMED), Yong Loo Lin School of Medicine. Prior joining NUS, she was a Medical Educationalist attached to the Medical Education Research and Development Unit (MERDU) in University of Malaya, Malaysia. After obtaining her PhD in education, she has been actively involved in MBBS curriculum planning and provide staff training in University of Malaya. Her main research interests are in teaching and learning approaches, technology in teaching and learning, student learning and qualitative research.

dr. Ardi Findyartini, PhD is Head of Department of Medical Education, Faculty of Medicine, Universitas Indonesia. She graduated as medical doctor in 2002 and completed her PhD in medical education in 2012. She is also the Head of Medical Education Unit of FMUI and Head of Medical Education Center Cluster at IMERI, FMUI. She has been actively involved in the curriculum development of undergraduate and postgraduate medical program and in conducting faculty development programs in FMUI and at the national level. She has been publishing scholarly work in national and international peer reviewed journals and conferences. Her research interest is in the curriculum development, inter-professional education, assessment, clinical teacher, and clinical reasoning, students' adaptation and transition and socio-culture related issues in medical and health professions education.

Background

Entrustable Professional Activities are tasks or responsibilities that can be entrusted to a trainee once sufficient competence is reached to allow for unsupervised practice. Since the introduction of EPA by Olle ten Cate in 2005 to merge the gap between learning of individual competencies and competence in real world practice, many medical schools begun to develop and apply EPAs in their training programme. However, this concept has not been fully grasped by many stakeholders and lack of proper training before implementing EPAs. Hence, this workshop will address these issues.

Objectives

At the end of the workshop, the participants are able to:

1. discuss the key features of EPAs
2. formulate EPAs in their respective disciplines
3. supervise the students in the different disciplines to achieve entrustment.

Scope of discussion

1. Features of EPAs
2. Supervision technique

Activities

Time	Session
15 minutes	Welcome & Introduction
45 minutes (Plenary + Q&A)	Introducing EPAs : Why and What
30 minutes	Activity 1 (Hands-on: What is EPA and supervision)
15 minutes	Tea break
60 minutes	Activity 2 (Hands-on: Develop an EPA)
15 minutes	Wrap-up

Maximum number of workshop participants

30 participants.

Reading materials

1. <http://kjme.kr/journal/view.php?number=1183> (As pre-reading)

List of workshop facilitators

1. Dujeepa Samarasekera/ Lee Shuh Shing (Resource person)
2. Ardi Findyartini (Facilitator)

Specific requirements

1. Pre-reading above (links) should be sent to the participants before the workshop.



10 A primer on
entrustable professi

2. The following template is required for all the participant. Hence, please print for the workshop participants.



EPA Template.docx

Short description (summary) of the workshop

Background: Although many medical schools begun to develop and apply EPAs in their training programme, this concept has not been fully grasped by many stakeholders and there are still lack of training before implementing EPAs.

Structure of the workshop: This is a fully hands-on session with sharing of experiences and the process in developing EPAs for health professional courses specifically in medicine and how supervision is conducted to achieve those EPAs. Participants will then be given the opportunity in formulating their own EPAs. Finally, the participants will share and discuss the EPAs formulated.

Methods: To address this gap, a 3-hour workshop is created to introduce faculty to EPAs and their assessment and to provide hands-on practice developing and using EPAs.

Who should attend: Everyone, specifically medical and nursing educators, who is interested in deepening his/her knowledge in EPAs

PRE- CONFERENCE WORKSHOP IV FACILITATING POST GRADUATE TRAINEES' PROFESSIONAL DEVELOPMENT THROUGH ROLE MODELLING

Prof. Albert Scherpbier, PhD, Dr. Nani Cahyani Sudarsono, SpKO

Professor Albert Scherpbier is Professor of quality promotion in Medical Education and Dean of the Faculty of Health, Medicine and Life Sciences and Vice Chair of Maastricht University Medical Centre. His Key interest in medical education are quality assurance professionalization of medical education, career prospects for medical teachers, involvement of medical students in improving the quality education, and medical education research. He has published extensive on medical education research. He published around 300 papers in international peer reviewed journals, 100 papers in national journals and around 70 chapters in books and conference proceedings.

He teaches courses on medical education research for the Maastricht School of Health Professions Education. He supervise national and international PhD students (S1 finished) and has been a consultant to medical schools in various countries, including Indonesia, Uganda, Nepal and Ghana.

He has been a driving force for curriculum innovation aimed at promoting integration of basic science and clinical science and teaching in realistic contexts. Professor Scherpbier is also involved in innovations in postgraduate specialist training. Besides his job as Dean he is also CEO of Scannexus (a MRI facility with scanners up to 9.4)

Dr. Nani Cahyani S, SpKO is a senior lecturer in medical education in the Department of Medical Education, Faculty of Medicine Universitas Indonesia. Graduated as general physician education in 1998. As a doctor, she worked at Jayapura Regional General Hospital, Papua in 1988-1992. After completing study of Sports Medicine Specialist at Faculty of Medicine Universitas Indonesia, she began actively teaching in two programs, namely the Department of Physiology and Sports Medicine FMUI. She also works as a consultant at the Faculty of Medicine Sport Clinic. She was as coordinator of the Undergraduate Program on Faculty of Medicine Universitas Indonesia since 2008 until 2014. In the next years, she appointed as Education and Student Manager for four years. Her research interest were about muscle physiology and muscle training, physical fitness, and physical fitness and exercise in children.

Background

Role Models are very important in learning at all levels. For example if students learn that, they have to ask open questions to patients and clinicians say they should not do, they will stop with asking open questions. The issue is that not everybody realise that everybody is a role model.

Objectives

At the end of the workshop, the participants are able to:

1. Understand that they are role models
2. Know how to improve as role model
3. Understand the relations between professionalism and role modelling

Scope of discussion

1. Family situation in role modelling
2. Culture of feedback
3. How to improve

Activities

Time	Session
30 minutes	Realizing role modelling
30 minutes	How to improve
30 minutes	Cultural issues
30 minutes	Feed back
60 minutes	What happens after the workshop

Maximum number of workshop participants

30 participants.

Reading materials

List of workshop facilitators

1. Albert Scherpbier (Resource person)
2. Nani Cahyani (Facilitator)

Specific requirements

(the organizing committee will prepare a set of standard audiovisual equipment – laptop, LCD projector and microphone, and please list any additional requirements necessary such as flipchart, markers, sticky notes, additional computer speakers, round table seating arrangement, etc.)

1. three flipovers
2. possibility of working in small groups
3. laptop etc for some slides
4. depending on acoustic microphone

Short description (summary) of the workshop

The workshop will start with making the participants aware of their role as role model in their family and at work. Then we will discuss how to improve. Cultural issues will be the next step. What is possible in the local context? How can feedback be organised? What will happen after the workshop.

PRE- CONFERENCE WORKSHOP V

THE USE OF (ELECTRONIC) PORTFOLIOS FOR LEARNING AND ASSESSING IN THE WORKPLACE

Prof. Erik Driessen and dr. Gregorius Ben Prajogi, Sp.Onk.Rad(K), M.PdKed,
Dr. dr. Aulia Rizka, SpPD-KGer, M.PdKed.

Prof. Erik Driessen is Professor in Medical education and Chair of the Department of Educational Development and Research at the Faculty of Health, Medicine and Life Sciences of Maastricht University. For the Journal Perspectives on Medical Education he is Editor in Chief. Driessen is interested in topics such as learning and assessment in the workplace and education across different cultures. He has published > 100 peer-reviewed manuscripts and book chapters. In 2016 he was appointed an Honorary Fellow of the Academy of Medical Educators in the United Kingdom. And since 2017 he is an Adjunct Professor of Medicine at the School of Medicine of the Uniformed Services, United States of America.

dr. Gregorius Ben Prajogi, Sp.Onk.Rad(K), M.PdKed is a staff member at the Department of Radiotherapy in Cipto Mangunkusumo Hospital (RSCM)/ Faculty of Medicine Universitas Indonesia (FMUI). After obtaining his undergraduate degree from FMUI in 2006, he entered the Radiation Oncology residency programme at RSCM-FMUI and obtained his national board certification from the Indonesia College of Radiation Oncology (KORI) in 2011. He was enrolled in the Department of Medical Education FMUI Master's programme in Medical Education in 2013. In addition to his tasks as Programme Secretary and Coordination for Education and Training at Department of Radiotherapy RSCM, he also serves as Curriculum Development Team member in KORI, Education Taskforce member in the Indonesian National Cancer Control Committee, Education and Training Committee (ETC), member in the Federation Agreement Consultant in the International Atomic Energy Agency (IAEA). His main interest is in the implementation of competency-based curriculum in postgraduate medical education.

Dr. dr. Aulia Rizka, SpPD-KGER., M.Pdked is a medical staff of Geriatric Division in Department of Internal Medicine, Faculty of Medicine Universitas Indonesia (FMUI). She has graduated as Medical Doctor from Faculty of Medicine University of Airlangga and has graduated her Doctoral degree on

Biomedical (FMUI) in 2017. She also works as a consultant at Geriatric Division in Department of Internal Medicine, FMUI. Her currently research was about Effect of *Nigella sativa* Seed Extract for Hypertension in Elderly and have been published on Acta Medica Indonesiana in 2017. Dr. Aulia Rizka now actively as a Vice Coordinator of Academic quality assurance of Specialist College Association in Internal medicine.

Background

The assessment of performance in the medical workplace is an important challenge on all levels of medical training (under-, postgraduate and CME). As the ability to self-assess has shown to be limited, there is a call for tools to assess performance and provide feedback as a basis for further development. Literature on performance assessment shows that the incorporation of information from multiple sources and various occasions is essential in order to evaluate a complex construct such as doctor performance. The assessment toolbox in workplace learning consist of e.g. observation of clinical activities (Mini-CEX) and feedback from peers, co-workers and patients (MSF), self-reflections on learning, case-based discussions. In this workshop, we explain the use of an electronic portfolio incorporating these different tools. The aim of the session is to enhance the understanding of the workshop participants of the opportunities and pitfalls of workplace assessment with an electronic portfolio. After a short introduction, participants will have the opportunity to practice with combining the evidence from different assessment tools and encouraging reflection.

The workshop will be highly interactive, requiring participants to use both the evidence and apply it to their assessment practices. This interactive workshop is designed for an audience of educators interested in developing workplace assessment systems and improve their feedback skills in workplace learning. The workshop can facilitate participants with different levels of expertise on workplace-based assessment.

Objectives

At the end of the workshop, the participants are able to:

1. Understand the opportunities and pitfalls of workplace assessment with an e-portfolio

Scope of discussion

1. Eportfolio
2. Workplace based assessment
3. Reflective practise

Maximum number of workshop participants

30 participants.

Reading materials

1. Driessen, E.W. (2017) Do portfolios have a future? *Advances in Health Science Education* 22(1), 221-228.
2. Tartwijk, J. & Driessen, Erik W. (2009) Portfolios for assessment and learning: AMEE guide no. 45. *Medical Teacher*. 31(9): 790-801.

List of workshop facilitators

1. Erik Driessen (Resource person)
2. Gregorius Ben Prajogi (Facilitator)
3. Aulia Rizka (Facilitator)

Specific requirements

1. flipchart and markers
2. computer speakers

Short description (summary) of the workshop

The assessment of performance in the medical workplace is an important challenge on all levels of medical training (under-, postgraduate and CME). As the ability to self-assess has shown to be limited, there is a call for tools to assess performance and provide feedback as a basis for further development. Literature on performance assessment shows that the incorporation of information from multiple sources and various occasions is essential in order to evaluate a complex construct such as doctor performance. The assessment toolbox in workplace learning consist of e.g. observation of clinical activities (Mini-CEX) and feedback from peers, co-workers and patients (MSF), self-reflections on learning, case-based discussions. In this workshop, we explain the use of an electronic portfolio incorporating these different tools. The aim of the session is to enhance the

understanding of the workshop participants of the opportunities and pitfalls of workplace assessment with an electronic portfolio. After a short introduction, participants will have the opportunity to practice with combining the evidence from different assessment tools and encouraging reflection.

The workshop will be highly interactive, requiring participants to use both the evidence and apply it to their assessment practices. This interactive workshop is designed for an audience of educators interested in developing workplace assessment systems and improve their feedback skills in workplace learning. The workshop can facilitate participants with different levels of expertise on workplace-based assessment.

PRE- CONFERENCE WORKSHOP VI

DEVELOPMENT OF EFFECTIVE CONTINUING PROFESSIONAL DEVELOPMENT PROGRAMS

Prof. Kiki Lombarts and Milou Silkens, PhD

Prof. Kiki Lombarts received her Master in Health Sciences from Erasmus University Rotterdam (1991), and her PhD from the University of Amsterdam, Faculty of Medicine (2003). She spent the past 25 years working in the field of professional performance of medical specialists. Her topics of interest include professionalism, performance assessment and improvement of clinicians and clinical teachers, faculty development, physicians' well-being and compassionate health care. Prof. Lombarts worked for different organizations within the Dutch health care system and took on different roles as researcher, independent consultant, coach, trainer and member of various hospital governance boards. Kiki Lombarts was involved and leading in various (inter)national and local (quality management) initiatives in both patient care and postgraduate medical education. Currently Kiki Lombarts is the chair of the Professional Performance research group at the Amsterdam University Medical Center (Amsterdam UMC), the Netherlands, where she supervises and collaborates with a fun team of PhD candidates and postdocs. She is the chair of the Educational Committee of the Amsterdam UMC Graduate School, and co-chair of the Educational Quality Committee of the Amsterdam Public Health research institute. She is also is member of the Gender & Health program committee of the Netherlands Organization for Health Research and

Development. She is a widely invited (inter)national lecturer and has published approx. 100 peer reviewed (PubMed indexed) papers in the area of professional performance, i.e. on the development and validation of measurement tools, peer review, feedback, professionalism, work engagement and performance change.

Milou Silkens, PhD Milou completed the bachelor Health Sciences and the Research Master Health Sciences at Maastricht University. Besides her study, she was enrolled in an Honours Program for Education during which she researched the perceived effects of a faculty development program. Furthermore, she was an active member in the education committee Health Sciences and the Student Council of her faculty. She also worked as a tutor throughout her studies.

After finishing her Masters, Milou completed her PhD in Medical Education at the Academic Medical Center/University of Amsterdam from October 2013 till October 2017. She successfully defended her thesis entitled "New Perspectives on Learning Climates in Postgraduate Medical Education" on the 23rd of February 2018.

Milou is currently a lecturer at the VU for the Bachelor "Gezondheid & Leven". She is also involved in postdoctoral research at the Professional Performance research group in the AMC.

Background

Our societies and healthcare systems are changing rapidly and place new pressures and demands on care givers at an unprecedented rate. Clearly, professional development is a life long endeavour for all health care professionals, and indeed is a joint responsibility for individuals and their organizations. During this workshop we will address the challenges of modern CPD programs.

Objectives

At the end of the workshop, the participants:

1. Gained insight into the evidence regarding CPD effectiveness.
2. Have identified the areas for CPD program development for their own institutions
3. Have debated the role of assessment(s) *for* learning in their own contexts

Scope of discussion

1. The need for needs assessment
2. CPD: Maintenance of Certification (MoC) or individual pathways.
3. Challenges, facilitators and barriers to developing and implementing CPD.
4. Assessment tools: MSF as a widely used strategy for CPD.
5. Using positive psychology for more effective learning.

Activities

Time	Session
15 min	Setting the stage: welcome and goal setting
45 min	State of the art in CPD: lecture + discussion in groups
30 min	What do you / your institution need to address? Reviewing your own (institutions') areas for professional development.
45 min	The use of tools to assess and to reflect: lecture + discussion in groups + plenary feed back
30 min	Exploring how to have a positive peer conversation for professional development: discussion + role play
15 min	Wrap up and closure

Maximum number of workshop participants

25 participants.

List of workshop facilitators

1. Prof. dr. Kiki Lombarts (Resource person)
2. Dr. Milou Silkens (Resource person)

Specific requirements

(the organizing committee will prepare a set of standard audiovisual equipment – laptop, LCD projector and microphone, and please list any additional requirements necessary such as flipchart, markers, sticky notes, additional computer speakers, round table seating arrangement, etc.)

1. Round table seating (4 tables)
2. Flip charts + markers

Short description (summary) of the workshop

This workshop builds on the premise that an effective CPD program or course should be preceded by a needs assessment of both educational and learning needs. Participants will be discussing (how to assess) these needs. Next, to monitor effectiveness current performance levels need to be determined. We will present a successful Dutch approach of performance evaluation and improvement using various *evidence-based* measurement tools and some potential (individual and group level) follow up strategies.

*Oral
Presentation*

GROUP A (ROOM 1)

At Auditorium 1, Lv 3, IMERI-FMUI

No	Title	Presenter	Institution	Code
1	Content Validity of Maslach Burnout Inventory Educator Survey for Measuring Teaching Staff Burnout in Medical School in Indonesia	Mona Marlina	FK- Universitas Pelita Harapan	JOA01
2	Integration of Healthcare System into Medical Curriculum	Levina Chandra Khoe	Department of Community Medicine, Universitas Indonesia	JOA03
3	Smartphone Addiction and Academic Procrastination: a Cross-sectional study	Siti Munawaroh	Universitas Sebelas Maret	JOA05
4	Effectiveness on Indigenous health and Behavioral Medicine Module in Enhancing Cultural Competence: Students' reflection	Miko Ferine	Faculty of Medicine, Universitas Jendral Soedirman	JOA06
5	Institutional Investment in Effective Faculty Development	Riry Ambarsarie	Department of Medical Education, Universitas Bengkulu	JOA08
6	Career Trends as GP in Indonesia	Hikmawati Nurokhmani	Department of Medical Education and Bioethics, Universitas Gadjah Mada	JOA18

GROUP B (ROOM 2)

At Auditorium 2, Lv 3, IMERI-FMUI

No	Title	Presenter	Institution	Code
1	The Relationship Between Feedback Orientation and Responsibility to Overcome Feedback Barriers Among Year-One Medical Students at Nottingham University: cross sectional study	Angela Sima Nariswari	Faculty of Medicine, Universitas Katolik Widya Mandala Surabaya	JOB02
2	The Correlation Between Self Efficacy with Stress in General Medical Students 2014 Who is Script at Malahayati University	Annisa Yuwita	Universitas Malahayati	JOB10
3	The Influence of Self Directed Learning Application to the Competency Test of Clinical Student	Ade Kiki Riezky	Faculty of Medicine, Abulyatama University	JOB12
4	Relationship Between Adaptive and Maladaptive Coping with Burnout of First Year Undergraduate Students in Faculty of Medicine University of Indonesia	Rena Palupi	Faculty of Medicine, Universitas Indonesia	JOB14
5	The Relationship Between Type of Motivation and Burnout in Medical Student during Transition from Preclinical to Clinic Universitas Indonesia	Nurita Adha Dianti	Faculty of Medicine, Universitas Indonesia	JOB15

GROUP C (ROOM 3)

At Auditorium 3, Lv 3, IMERI-FMUI

No	Title	Presenter	Institution	Code
1	Profile Analysis of Objective Student Oral Case Analysis (OSOCA) Learning Goals Achievement in Medical Students	Uswatun Khasanah	Swadaya Gunung Jati University	JOC04
2	Rubric For Examiner Standardization in Portfolio Assessment	Savitri Shitarukmi	Faculty of Medicine, Public Health, and Nursing, Universitas Gadjah Mada	JOC07
3	Learning Environment Assessment on The Pediatric Residency program at Moewardi Hospital Universitas Sebelas Maret Surakarta: 5 years comparison	Annang Giri Moelyo	Department of Pediatric, Moewardi Hospital, Universitas Sebelas Maret	JOC09
4	Assessing Reliability of the Objective Structured Clinical Examination and Correlation with Standardized Patient Satisfaction	Marindra Firmansyah	Faculty of Medicine, Universitas Islam Malang	JOC11
5	The Difference Learning Impact in Written and Oral Assessment	Sylvia Mustikasari	Universitas Jendral Ahmad Yani	JOC13
6	The Relationship between Deliberate Practice with OSCE Students Score of The Faculty of Medicine and Health Sciences Univeristy of Jambi	Nyimas Natasha Ayu Shafira	University of Jambi	JOC16
7	A National PHEEM Survey: Indonesian Pediatric Residency Program	Hendarto A	Kolegium Anak Indonesia	JOC18

Room A

Abstract No. JOA01

Content Validity of Maslach Burnout Inventory Educator Survey for Measuring Teaching Staff Burnout in Medical School in Indonesia

Mona Marlina*, Ardi Findyartini,** Natalia Widiasih**

*Faculty of Medicine Universitas Pelita Harapan

**Faculty of Medicine Universitas Indonesia

Background: The duty and responsibility of teaching staff in medical school is a tough task and needs to get attention from various parties. One way to measure burnout among educators or teachers is to use the Maslach Burnout Inventory Educator Survey (MBI-ES) tool. This study aims to validate the contents of MBI-ES in order to represent the condition of burnout of teaching staff in medical school.

Aims: Obtaining the conformity of the MBI-ES items with the burnout of the teaching staff in medical school in Indonesia.

Methods: This was a cross sectional study with qualitative approach consisting of Focus Group Discussion (FGD) and expert panel review. The FGD aimed to explore perceptions of the burnout of teaching staff in medical school and additional points of the MBI-ES items. The expert panel review aimed to assess the clarity of language and editorial and the relevance of the items. Thematic analysis was conducted on verbatim transcription of FGD with notes of additional MBI-ES item suggestions. The descriptive quantitative analysis was completed for expert panel data by taking the criteria of agreement on the relevance and clarity of the original and additional MBI-ES items (80%).

Results: A total of 17 medical faculty members became FGD interviewees and 24 expert panels provided feedback on the modified MBI-ES items in the next stage. Considering the input from FGDs, the previous MBI-ES with 22 items which represented domains of emotional exhaustion, depersonalization, and personal accomplishment domain, increased into 61 points with similar domains. The additional items accommodated the context of the roles conducted by the teaching staff in the medical school and the involvement of the academic community in the implementation of

the teaching staff duties. The expert panel review and consideration of the original MBI-ES item, set 22 MBI-ES items that had been adapted to the context of medical teaching staff in Indonesia.

Conclusions: This research has successfully validated the contents of the MBI-ES items which still includes 3 domains of burnout which is accordance with the context of medical teaching staff. Further research for the evaluation of construct validation, response processes, and concurrent validation need to be done.

Abstract No. JOA03

Integration of Healthcare System into Medical Curriculum

Levina Chandra Khoe, Retno Asti Werdhani

Department of Community Medicine, Faculty of Medicine, Universitas Indonesia

Background: Medical curriculum is heavily emphasized on clinical science. However, with the introduction of national healthcare insurance, doctors should understand the healthcare system, in which they never receive any knowledge about this during their education. Having knowledge on healthcare system is important as preparation for medical students to enter internship.

Aims: This study describes the evaluation of health system module in medical curriculum.

Methods: The health system module was implemented in July and August 2018. About 180 students followed this module and received one-week full of lectures and discussion on health system. The participants were medical students in their third year, whom still in pre-clinical rotation.

Results: Students evaluated the quality of the overall curriculum. They assessed the material content, discussion, and facilities necessary for this health system module. This module is considered different from other modules. The students felt this module is new and important because it reflects the real situation of health system.

Conclusions: Key lessons learned included more interactive lectures and more real examples on the implementation of health system in Indonesia to make the module interesting for participants.

Abstract No. JOA05

**Smartphone Addiction and Academic Procrastination:
a Cross-sectional study**

Siti Munawaroh, Aditya prima Wardana, Dhoni Akbar Ghozali
Universitas Sebelas Maret

Background: Smartphone is a phone which has some types of operating system that can connect to the internet and it also has a function such a computer which is as personal assistant, seeking various information and redirecting life stress, to communicate and play games. Using smartphone excessively can involve the disturbance

Aims: This study was aimed to find correlation between smartphone addiction and academic procrastination on the students of Medical Faculty of Sebelas Maret University.

Methods: This was observational analytic research with cross-sectional approach. Sampling technique used proportional stratified random sampling. This study uses Smartphone Addict Scale (SAS) and Academic Procrastination Questionnaire. Data analysis using the Spearman test.

Results: Obtained 276 respondents. After the Spearman correlation test obtained the significant value (2-tailed) in the above output is obtained in the amount of 0.000 ($p < 0.05$) and correlation of coefficient number in the amount of 0.315. It means that statistical relation between addiction of smartphone and academic procrastination on students of Medical Faculty of Sebelas Maret University.

Conclusions: There is a significant relation between addiction of smartphone and academic procrastination on students of Medical Faculty of Sebelas Maret University

Abstract No. JOA06

**Effectiveness of Indigenous Health and Behavioral Medicine Module in
Enhancing Cultural Competence: Students' reflection**

Miko Ferine, Amalia Muhaimin
Faculty of Medicine, Universitas Jendral Soedirman

Background: Physician needs to recognize the culture existed in the community in order to deal with their health and illness behavior. Faculty of Medicine Unsoed Purwokerto Indonesia developed a module of "Indigenous Health and Behavioral Medicine" to strengthen the students' cultural competence as part of patient and community health management

Aims: This study aimed to evaluate the effectiveness of module of Indigenous Health and Behavioral Medicine in strengthening students' cultural competence. This study also were expected to draw what and how students learned from their experience in joining the module.

Methods: This study used qualitative methods. Focus group discussion were developed to evaluate the effectiveness of the module in enhancing cultural competence. We also analyzed how students deal with community health and illness behavior from students' reflection.

Results: Students felt enthusiastic to explore the way people find solution for their health problems. Student insights became open about the characteristics of health and illness behavior of the indigenous society. They could understand the reason why people still retain the traditional medicine. They could also find out their perspective about modern medicine. With the provision of such knowledge, students were expected to understand healthy and illness behavior indigenous society and to deal with it.

Conclusions: The module of "Indigenous Health and Behavioral Medicine" is not only interesting but also can enhance student competence in handling patient problem comprehensively related to local culture background.

Abstract No. JOA08

Institutional Investment in Effective Faculty Development

Riry Ambarsarie

Department of Medical Education, University of Bengkulu, Indonesia

Background: Enhancing the quality of faculty development is necessary to support students through an improved holistic medical education experiences that enhances learning and improves students outcomes. To achieve effective faculty development requires institution to carry out their responsibilities to faculty.

Aims: The aim of this paper is to explore the role of institution towards faculty in order to perform effective faculty development.

Methods: In this literature review study, inclusion criterion were defined and the authors independently reviewed the search result. The key information of this articles included was methodically abstracted and coded, synthesized and discussed in the categories institutional commitment of faculty development study especially in medical education.

Results: Institutions must demonstrate to accreditors, parents and market forces that they are student ready if they want to survive with an emphasis on creating effective learning environment, the latter often tied to institutional performance. Institution must do a much better job of build the faculty development. Institution can and should provide resources to help the faculty to serve better educational process such as retainment, recruitment, re-energization, recognition, rewards and respect.

Conclusions: In an environment where many institutions,, are increasingly facing budgetary challenges to increase efficiency, improving student outcomes through enhancing faculty development can be good for the institution's bottom line.

Abstract No. JOA18

Career Trends as GP in Indonesia

Hikmawati Nurokhmanti

Department of Medical Education and Bioethics, Universitas Gadjah Mada

Background: Inline with implementation of Indonesia national coverage which already applied since 2014, Indonesia health care system gives clearer career pathway within health areas. General practitioners within primary care level have important function as first gate within health service system. Unfortunately, the implementation of national coverage within health care system not sustainable yet. As consequences, career pathway in health care system is not established yet. It is important to understand students' perspectives on GP career to predict further health care system and to support establishment of health care system.

Aims: This study is aimed to understand students' perspective on GP for future career.

Methods: A mixed method was carried to get data by using focus group discussion, in-depth interview, and survey. The survey will balance the qualitative part since the subjects were taken only from one institution. Three FGD were conducted with third year students and three in-depth interviews were conducted with students who will get their liaison and practice as. The surveys' response rate reached eighty one percent (1788 out from 2204 students who already finished their national board exit exam).

Results: Students' perspective on GP as their career choice is still good but they are not preferred take GP as their career pathway. They said that GP has imbalance between works and rewards, not clear future career pathway, being as the lowest level in health care system which is not "cool", the science itself too broad – not specific which make huge nervousness, and the competency is limited as it said "there is not so much to do as GP".

Conclusions: Although there is some hope which could raise career trends as GP since the students still have willingness to work in 3T areas, GP as career need to be developed either by giving right rewards or developing its career pathway since GP role as gate keeper within health care system is important.

Room B

Abstract No. JOB02

The Relationship Between Feedback Orientation and Responsibility to Overcome Feedback barriers Among Year-One Medical Students at Nottingham University: Cross Sectional Study

Angela Sima Nariswari,
Faculty of medicine, Universitas Katolik Widya Mandala Surabaya

Background: Feedback orientation is a personal's overall receptivity to feedback, a multidimensional construct that comprises utility, accountability, self-efficacy, and social awareness. Although many studies showed that feedback orientation is predictive for various criteria of performance outcomes, no research to date has tested its implication in a medical education context

Aims: To determine the way in which the feedback orientation among year-one medical students at Nottingham University relates to their responsibility to overcome feedback barriers

Methods: This study adopted a quantitative approach using cross-sectional design of 46 year-one medical students. Data were collected using two measures: (1) Feedback Orientation Scale and (2) Feedback Responsibility Scale. Correlation analyses were carried out using Karl Pearson's test. Ethical approval was obtained from the ethics committee of The Nottingham University

Results: The findings showed a significant, positive correlation between three feedback orientation dimensions (utility, accountability, self-efficacy) with the students' responsibility to overcome feedback barriers. In an orderly manner, the correlation coefficients are 0.688, 0.679, and 0.674, respectively. This means that these three dimensions are positive predictors of how the students feel it is their responsibility in overcoming feedback barriers. The findings, however, showed no correlation between social awareness and the responsibility to overcome feedback ($r= 0.021$)

Conclusions: Feedback orientation significantly relates with the students' sense of responsibility to overcome the feedback barriers. This finding

highlights the important role of feedback orientation in increasing the use of feedback.

Abstract No. JOB10

The Correlation Between Self Efficacy with Stress in General Medical Students 2014 Completing Undergraduate Thesis at Malahayati University

Annisa Yuwita, Sri Maria Puji Lestari
Malahayati University

Background: Self-efficacy is expressed as a person's belief that he or she can perform a task at a certain level. Each individual has different self-efficacy. Individuals who have low self-efficacy will easily feel depressed and it may result in stress. Stress among final-year medical students is usually associated with the completion of undergraduate thesis.

Aims: To identify the correlation of self-efficacy with stress level in undergraduate medical student of 2014 who are completing their undergraduate thesis.

Methods: This was a cross-sectional study. This sampling technique using convenient sampling technique based on inclusion criteria.

Results: From 130 samples, a most respondents have high self-efficacy (66 respondents, 50.8%) and normal stress level (79 respondents, 60.8%). Both variables are significantly and negatively and correlated (Spearman Test $R = -0.278, p 0.001$).

Conclusions: This study showed that there was a negative correlation between self-efficacy and stress among undergraduate medical students in Malahayati University.

Abstract No. JOB12

**The Influence of Self-Directed Learning Application to The Competency
Test of Clinical Student**

Ade Kiki Riezky, Siti Maywani Voorwanti
Faculty of Medicine, Abulyatama Univeristy

Background: Competencies of students graduating from medical profession programs in Indonesia were tested through the Competency Test. The clinical students must pass the competency test. Many factors influence the competency graduation, one of them is self-directed learning (SDL). Previous research states that SDL is closely related to student academic achievement.

Aims: The research was purposed to determine the effect of SDL on the graduation of the competency test participants.

Methods: The type of research used is quantitative with a cross sectional approach. Retrieval of data using a questionnaire. The sample of the study was all the first-taker participants of the Medical Faculty of the University of Abulyatama who attended the competency test in the period May 2018 total 71 people.

Results: The group of students who applied SDL passed the competency test as many as 26 people (59%), while those who did not pass the competency test were 18 people (41%). The group of students who did not apply SDL passed the competency test as many as 14 people (52%), and did not pass as many as 13 people (48%).

Conclusions: The results showed that the application of SDL had a significant effect on the competency test graduation with a value of $p = 0.004$ ($p < \alpha = 0.05$).

Abstract No. JOB14

**Relationship Between Adaptive and Maladaptive Coping with Burnout of
First Year Undergraduate Students in Faculty of Medicine
Universitas Indonesia**

Rena Palupi, Ardi Findyartini
Faculty of Medicine, Universitas Indonesia

Background: Medical education is a lifelong learning that makes students vulnerable to burnout if the coping mechanism is inadequate. Appropriate coping mechanism can help students to minimize burnout. According to Meyer et al, coping mechanisms can be classified as adaptive and maladaptive coping.

Aims: The purpose of this study is to assess the relationship between adaptive and maladaptive coping with burnout (emotional exhaustion, cynicism, personal accomplishment) of first year undergraduate students in Faculty of Medicine Universitas Indonesia.

Methods: This study was a cross-sectional study with a random sampling of first year undergraduate students in Faculty of Medicine University of Indonesia 2017/2018. A total of 167 respondents filled the Brief COPE and MBI-Student Survey questionnaire. Spearman correlation analysis was completed.

Results: Result shows that there was a significant negative correlation between adaptive coping with cynicism ($r = -0.165$, $p = 0.033$) and significant positive correlation with personal accomplishment ($r = 0.417$, $p = 0.001$). Maladaptive coping was significantly correlated with emotional exhaustion ($r = 0.403$, $p = 0.001$) and cynicism ($r = 0.372$, $p = 0.001$). There were no correlation between adaptive coping with emotional exhaustion ($p = 0.247$) and maladaptive coping with personal accomplishment ($p = 0.303$).

Conclusions: Adaptive coping negatively correlated with one aspect of burnout i.e cynism, and positively correlated with personal accomplishment. On the other hand, maladaptive coping positively correlated with burnout which are emotional exhaustion and cynism. Therefore, it is necessary to introduce appropriate coping mechanism to first-year medical students to prevent them from having burnout.

Abstract No. JOB15

**The Relationship between Type of Motivation and Burnout in Medical
Student during Transition from Preclinical to the Clinic
Universitas Indonesia**

Nurita Adha Dianti, Ardi Findyartini
Faculty of Medicine, Universitas Indonesia

Background: Medical students should undergo several stages in their education, one of them is transition from preclinical to clinical year. This transition introduces new challenges, environments, and pressures that can cause stress. If stress cannot be overcome properly, it may cause depression, burnout, and anxiety. Motivation is important for student to study and cope from stress and burnout.

Aims: To assess the relationship between type of motivation and burnout in medical student during the transition period from preclinical to clinical phases.

Methods: This study was cross-sectional, with students (N=164) in the first year of transition from preclinical to clinical year. Students were categorized into four subgroups through analysis of intrinsic and controlled motivation using Academic Motivation Scale. Group membership is used as an independent variable to assess burnout components.

Results: Four groups were identified: students who are interest-status motivated constituted 79.2% of the population (N=130), interest-motivated students constituted 13.41% of the population (N=22), low motivated students constituted 6.09% of the population (N=10), status-motivated student 1.2% of the population (N=2). Interest-motivated students had higher personal accomplishment ($p = 0.03$) and lower depersonalization ($p = 0.026$) than interest-status motivated students.

Conclusions: The transition from pre-clinical to clinical year in medical education is a stressful phase that may lead to student burnout. The interest-motivated profile is associated with low depersonalization and high personal accomplishment during study.

Room C

Abstract No. JOC04

Profile analysis of Objective Student Oral case Analysis (OSOCA) Learning Goals Achievement in Medical Students

Uswatun Khasanah, Tissa Octavira Permatasari
Swadaya Gunung Jati University

Background: Problem Based Learning (PBL) is a method of learning that demands active student's participation. One of the indicators of learning success on PBL is the achievement of learning goals. PBL which is evaluated using objective student oral case analysis (OSOCA).

Aims: To analyze the OSOCA learning goals achievement profile for first, second, and third year students at the Medical Faculty of Universitas Swadaya Gunung Jati.

Methods: This is a cross-sectional study involving 220 participants. Data were secondary data obtained from the Academic department. Data were analyzed using Kruskal-Wallis test followed by Mann-Whitney post hoc test.

Results: The average OSOCA learning goals achievement during the first semester was 63.86, increasing in the third semester with 77.24 and in the fifth semester with 89.43. The results also showed significant differences between semesters in learning goals achievement. The highest learning goals achieved in the fifth semester.

Conclusions: The more often students implement PBL, the higher learning goals are achieved.

Abstract No. JOC07

Rubric for Examiner Standardization in Portfolio Assessment

Savitri Shitarukmi, Siti Rokhmah Projosasmito, Noviarina Kurniawati.
Faculty of Medicine, Public Health and Nursing, Universitas Gadjah Mada

Background: Faculty of Medicine UGM has introduced portfolio for learning skills assessment. A rubric is developed to uniformly assess learning skills portfolio of first-year medical students.

Aims: The aim of this study is to measure interrater reliability of rubric used in portfolio assessment.

Methods: This study is conducted at Faculty of Medicine Universitas Gadjah Mada. A sample of fifty (N=50) from 254 first-year medical students were assigned to compile a learning skills portfolio in 5 weeks. The portfolios is collected and independently scored using the rubric by 2 examiners, each portfolio will be assessed.

Results: Interrater agreement will be reported. Data analysis is still on going.

Conclusions: It is expected that standardization scoring of portfolio assessments can be enhanced by using the rubric.

Abstract No. JOC09

**Learning Environment Assessment on The Pediatric Residency Program
at Moewardi Hospital University Sebelas Maret Surakarta:
5 years comparison**

Annang Giri Moelyo, Muhammad Riza, Fadhila Tia Nur, Hari Wahyu Nugroho,
Sri Martuti, Dwi Hidayah, Endang Dewi Lestari, Harsono Salimo
Department of Pediatric, Moewardi Hospital Universitas Sebelas Maret

Background: Learning environment has an important role in residency education. Learning environment will encourage a motivation to study and work well in hospital. A Postgraduate Hospital Educational Environment Measure (PHEEM) Questionnaire was a tool to assess learning environment. Regular assessment was needed to know learning environment changes.

Aims: to compare the learning environment in 5 years (2012-2015) on the pediatric residency program at Moewardi Hospital Universitas Sebelas Maret Surakarta

Methods: A modified-PHEEM Questionnaire was conducted in April 2012 and September 2017, and distributed to all on-going pediatric residents. Cronbach alpha was used for reliability test. Learning environment differences (total, grade, perceptions of autonomy, teaching, and social support) between the year 2012 and 2017 were analyzed by t-test.

Results: There were 32 and 49 subjects included by the year 2012 and 2017. The overall PHEEM score by the year 2012 and 2017 were 105.3 ± 19.1 and 116.4 ± 12.1 (the mean difference: 11.1 (4.2;18.0)). The mean differences of PHEEM score in junior, intermediate and senior grade were 10.4 (3.2;17.6), 17.4 (12.2;22.6), and 1.2 (-6.3;8.7), respectively. The mean differences of perceptions of autonomy, teaching and social support were 4.7 (2.2;7.2), 3.7 (1.0;6.4), 2.8 (0.7;4.9), respectively.

Conclusions: The perceptions of learning environment on pediatric residency program at Moewardi Hospital Universitas Sebelas Maret Surakarta is improving.

Abstract No. JOC11

Assessing Reliability of The Objective Structured Clinical Examination and Correlation with Standardized Patient Satisfaction

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Background: The Objective Structured Clinical Examination (OSCE) is the common method to assess the clinical skills competence in undergraduate medical school in Indonesia. Interpersonal and communication skills are fundamental clinical skills competence that measured in OSCE. This study have shown evidence of reliability of the OSCE using G-Theory and the correlation between Standardized Patient (SP) Satisfactory and OSCE performance.

Aims: The aims of this study were improve the clinical competence assessment in our school for quality improvement.

Methods: An observational cross-sectional study was conducted at Islamic Malang University (UNISMA) Faculty of Medicine in Indonesia. An OSCE with 79 fourth-year medical students in UNISMA medical school was conducted in the fourth year as a summative end of career final examination. EduG was used to run G-Theory analysis. We use questionnaire to assess SP Satisfaction in every station. Student's scores were standardized and correlation were calculated.

Results: The reliability of the OSCE is $G = 0.45$. From the G table shows that the source of error was the interaction between the students and station. There is no source of error resulted from "days" facet. From the school record shows that all the examiner has been trained and being rater more than once. There were no first-timer rater. The correlation between the OSCE and SP satisfaction scores was 0.06.

Conclusions: The reliability of this OSCE is consider low. One of the most possible source of error is poor design of the rubrics. Using GT to analyze shows us that this method is able to pin-point the source of error. Therefore, the improvement of the assessment quality in the future could be done in better oriented. The correlation OSCE and SP satisfaction is consider very low. Every OSCE needs good preparation specially in rubrics and the raters credibility. We need to make improvement in Clinical Skill Learning (CSL) specially in interpersonal skills/communications skills. The next research is needed to explore more detailed about SP satisfaction or SP role in assessment of the OSCE

Abstract No. JOC13

The Different Learning Impact in Written and Oral Assessment

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Universitas Jenderal Achmad Yani

Background: The ideal assessment method should drives student's learning based on the experience of assessment process. Therefore, different methods of assessment allows students to create different learning strategies. Our institution has develop an oral assessment as a part of cognitive assessment method.

Aims: The purpose of this study was to determine the difference of learning impact in MCQ (written assessment), OSOCA (oral assessment) and to identify factors that influenced the learning impact.

Methods: This research was a mixed method study. A quantitative approach was done by an analytical cross sectional comparative study on 270 medical students, analyzed using independent t-test. A qualitative approach was done by content-analysis from two groups of FGD (high and low academic achievement).

Results: The results showed that the average of learning impact in OSOCA was higher than MCQ. The independent t-test showed that the P-value of overall learning impact was 0,000 ($\alpha=0,05$). In sub-variable analysis, exam preparation 0,000 ($\alpha =0,05$), feedback 0,014 ($\alpha =0,05$), and self-evaluation 0,034 ($\alpha=0.05$). We also found that students with high academic achievement felt the difference was focusing in the difference of assessment preparation, while the low academic achievement was focusing in feedback quality.

Conclusions: There was a significance difference of learning impact between written and oral assessment. Oral assessment has better learning impact. Assessment preparation and feedback were dominant as the influenced factor.

Abstract No. JOC16

The Relationship between Deliberate Practice with OSCE Students Score of the Faculty of Medical and Health Sciences University of Jambi

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University of Jambi

Background: Deliberate practice is learning and skill training with structured activities that have four main aspects, namely planning, concentration, repetition and self-reflection. Clinical skill learning is one of the areas of competence in the medical education, and for the assessments, it employs Objective Structured Clinical Examination (OSCE).

Aims: The purpose of this study is to find out whether there is a relationship between deliberate practice with Objective Structured Clinical Examination

(OSCE) students score in medical students at the Faculty of Medical and Health Sciences, University of Jambi.

Methods: The study was conducted during April - August 2018. Research respondents were 231; namely, 4th and 6th semester students of the Medical Study Program of the Faculty of Medical and Health Sciences of the University of Jambi. The instrument used was a deliberate practice questionnaire.

Results: The result of the analysis of the four aspects of deliberate practice with OSCE students score are as follows: Planning aspect p: 0,67; Concentration aspect p: 0,48; Repetition aspect p: 0,82 and Self-Reflection aspect p: 0,01.

Conclusions: There is significant relationship between self-reflection aspect with the achievement of OSCE score for medical students of the Faculty of Medical and Health Sciences, Jambi University.

Abstract No. JOC18

A National PHEEM Survey: Indonesian Pediatric Residency Program

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Indonesian College of Pediatrics

Background: Postgraduate Hospital Educational Environment Measure (PHEEM), a Likert scale instrument, has been exercised worldwide in different medical education levels with significant validity and reliability. There has been no report on a national level regarding learning environment in pediatric residency in Indonesia.

Aims: To obtain feedback for curriculum improvement.

Methods: This stratified random sampling cross sectional survey on learning environment with PHEEM was conducted by the Indonesian College of Pediatrics (ICP) targeting the whole pediatric residency in 13 accredited Indonesian training institutions in 2017. The ICP had defined "satisfied" as any choice between strongly agree and agree on the PHEEM Likert scale (0-4).

Results: Of the 1113 pediatric trainee in the 13 training institutions, 191 (17.2%) residents were selected for the research, but only 150 responded (response rate 78.5%). Female to male ratio was 99:45 and the residents in stage of training composition were 43.75%, 34.72 %, and 21.53% for senior, apprentice and junior stage, respectively. The general score was 92 with no item ≤ 2 . Scores on subscale were as follows: perceptions on autonomy (30.4), teaching (32.05), and social support (29.5). Resident satisfaction rate with the general learning environment was 78.7%. Items resident that are less satisfied (<70%) are regular feedback from supervisors (69.3%), academic and clinical work (69%), student counselling (66%), instruction manual (60.8%), work load (58%), frequently disturbed by other non-rotational tasks (55.3%), resident quarters (50%), working hours (49.3%), food ration during on call duty (48%), and blaming culture (46.7%).

Conclusions: This first national PHEEM survey on pediatric residency learning environment in Indonesia indicates more positive than negative factors but room for improvement. The general PHEEM score of 92 is lower than reports from pediatric residency PHEEM score in Srilanka (102) and Saudi Arabia (98) with less satisfaction on several items.

*Poster
Presentation*

Theme A : Teaching learning, learning media

**Theme B : Curriculum, Tracer Study, Assessment, Peer-Assisted Learning,
Critical Thinking**

Theme C : Student well-being, Self-efficacy, Faculty development.

No	Title	Presenter	Institution	Code
1	APSYS PROTOTYPE as a Learning Application for Diagnosis and Medical Therapy for Medical Education	Boy Subirosa Sabarguna	Department of Community Medicine, Faculty of Medicine, Universitas Indonesia	JPA01
2	Student Perception of Anatomage: An Innovative Approach to Anatomy Education	Nurfitri Bustamam	Faculty of Medicine, Universitas Pembangunan Nasional Veteran Jakarta	JPA02
3	Pre-internship Medical Practice: Uncovering the Motives: A Pilot Study	Zakka Zayd Zhullatullah Jayadisastra	Faculty of Medicine, Universitas Sebelas Maret	JPB01
4	Relationship between Critical Thinking Skills (Metacognitive) and GPA in Medical Students	Iqbal Raka Aditya Chandra	Faculty of Medicine Universitas Trisakti	JPB02
5	Teaching Hospital and Number of Finished Laboratories Association with Progress Test Result of Medical Profession Students in UNISMA	Ariani Ratri Dewi	Universitas Islam Malang	JPB03
6	Correlation Between Grade Point Average and License Examination Results for Undergraduate Medical Students in faculty of Medicine University od Abulyatama	Syarifah Nora Andriaty	Faculty of Medicine, University of Abulyatama	JPB04

7	Introducing Entepreneur for Medical Student: Medicopreneur	Niko Azhari Hidayat	Universitas Airlangga Hospital	JPB05
8	Perception of Medical Students Toward E-Learning at Syiah Kuala University, Indonesia: Study at Basic of Digestive, Endocrine and Metabolic Module	Dedy Syahrizal	Faculty of Medicine, Universitas Syiah Kuala	JPB06
9	Negative Role Model in Medical Education: Be Aware...	Ita Armyati	Faculty of Medicine, Universitas Tanjungpura	JPC01
10	Medical Student Resilience in Preventing Educational Burnout in Clinical Practice: A Literature Review	Dewi Anggraeni Kusmoningrum	Faculty of Medicine, Universitas Indonesia	JPC02

Theme A

Abstract No. JPA01

APSYS PROTOTYPE as a Learning Application for Diagnosis and Medical Therapy for Medical Education

Boy Subirosa Sabarguna, Tomy Abuzairi, Nurul Hanifah, Kresna Devara
Department of Community Medicine, Faculty of Medicine, Universitas Indonesia

Background: Diagnosis and therapy paths that were previously book-shaped and desktop versions are mindset based on flowcharts, to determine diagnosis and therapy by doctors. This pattern is one of the drivers: (1) in systematic steps, (2) sequential steps, (3) involving important and relevant data, (4) rational decision making.

Aims: This APSYS application is made to make it easier for medical students to learn the flow of diagnosis and therapy in the form of Smartphone Version, so that: 1) it is lighter to carry, 2) interactive in appearance, 3) easier to use because it only chooses, 4) content clearly related

Methods: The method used is action research which starts from studying the existing books and desktop versions, then making prototypes as mobile apps complete with usage instructions, then conducted Program Tests by other programmers who are not related to research and content testing from medical education circles, this paper up to programmers test

Results: Prototype has been made an application Software version of the smartphone and developed with the name APSIS as a Learning Application for Diagnosis and Medical Therapy, with the results of the progress test shows: the program can run, the program logic is appropriate, the display is attractive and easy to use. It is ready to test content by medical education, and use tests by students at the university level.

Conclusions: APSIS is a prototype of the Diagnosis and Medical Therapeutic Learning Application, with the results of the programmer test showing good results and ready for further testing.

Abstract No. JPA02

Student Perception of Anatomage: An Innovative Approach to Anatomy Education

Nurfitri Bustamam, Diana Agustini PA
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Background: Anatomage is a virtual dissection which reconstructed from the cadaver so that anatomical structures can be visualized from various planes and can be seen in relation to other structures. In Academic Year 2017/2018 Faculty of Medicine Universitas Pembangunan Nasional Veteran Jakarta adopted anatomage in the anatomical education.

Aims: The aim of this study was to evaluate student perception regarding the technology.

Methods: A cross-sectional design was used in this study. The research subjects were second-semester students who took anatomy laboratory using anatomage. The subjects were asked to fill out questionnaires with a five-point Likert scales and open-ended questions addressing the role of anatomage in anatomy education.

Results: Most of the students agreed or strongly agreed that learning with anatomage is fun, can increase learning interest and enhance understanding. Only a small percentage of the students agreed or strongly agreed that anatomage could increase student participation in learning and made anatomy education more effective and interactive. They desired more time to use anatomage in a small group and had the opportunity to operate it. They also thought that anatomage cannot replace the cadaver.

Conclusions: This study revealed that students desired more time to use anatomage in a small group so anatomy education becomes more effective and interactive.

Theme B

Abstract No.JPB01

Pre-internship Medical Practice: Uncovering the Motives: A Pilot Study

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Faculty of Medicine, Universitas Sebelas Maret

Background: Internsip as stated in PERKONSIL No.1/KKI/PER/I/2010, is a one-year preregistration capability-training program for the fresh graduate medical doctor in Indonesia. In recent years, there is a six-month gap between the national exit exam and the beginning of internsip, filled with various independent activities, including pre-internsip medical practice (pIMP).

Aims: Current study was the first published study to identify the motives of the fresh graduate medical doctors in doing pIMP.

Methods: One hundred and thirty seven Indonesian fresh graduate medical doctors were asked using questionnaires for their involvement in doing pIMP and their reasons for their choice. The data then analyzed using descriptive statistic method.

Results: There were 46.7% fresh graduate medical doctors admitted in doing pIMP. The reasons identified in doing pIMP were preserving their clinical skills (34.2%), passing their internship waiting time (29.7%), finding income (22.8%), helping colleague or senior (12.7%), and trying out (0.6%). The

reasons for doctors not doing pIMP (53.3%) were pIMP's illegal status according to Indonesian law (75.3%), no interest (10.8%), prohibition in religious practice (10.8%), and other reasons (12.7%) which varied.

Conclusions: The motives of fresh graduate medical doctors in doing pIMP mostly were mostly to preserve clinical skills. Further study is needed to identify the motives more clearly.

Abstract No.JPB02

Relationship between Critical Thinking Skills (Metacognitive) and GPA in Medical Students

Iqbal Raka Aditya Chandra, Purnamawati Tjhin
Faculty of Medicine, Universitas Trisakti

Background: The grade point average (GPA) is the result of students learning achievement in a study program, is used as a parameter of the student progress in their education process. Many factors can affect student's GPA such as metacognition, respondent's characteristic, duration of study, and motivation in obtaining high GPA.

Aims: The purpose of this study was to determine the relationship between critical thinking skills (metacognitive), age and academic year with GPA in medical faculty students.

Methods: This study is using cross sectional study on 222 respondents of Faculty of Medicine in Trisakti University in march 2018. Metacognitive skill measurement using questionnaire Metacognitive Awareness Inventory (MAI) and GPA data obtained from secondary data. Data analysis was performed by chi square test using SPSS program version 24.

Results: The majority of respondents aged 19-20 years (56,3%) divided into year 1st, 2nd and 3rd. Respondents had development metacognitive skill (20,7%), Ok (67,6%) and Super (11,7%). Respondent's GPA divided into satisfactory (36%), very satisfactory (41,4%) and cum laude (22,5%). Analysis of relationship between GPA with metacognitive skill ($p=0,000$), age ($p=0,443$) and academic year ($p=0,200$).

Conclusions: There is a significant relationship between critical thinking skills (metacognitive) with GPA in medical faculty students of Trisakti University and there is no relationship with respondent's characteristic (age, academic year)

Abstract No. JPB03

Teaching Hospital and Number of Finished Laboratories Association with Progress Test Result of Medical Profession Students in UNISMA

Ariani Ratri Dewi, Rizki Anisa
Universitas Islam Malang

Background: National examination on medical profession student competency (Uji Kompetensi Mahasiswa Program studi Profesi Dokter/UKMPPD) served as exit exam in Indonesian medical education. Faculty of Medicine have the responsibility to prepare their student to pass this exam. Progress test is one means to evaluate that preparation.

Aims: To evaluate the effect of different teaching hospital and number of finished laboratories to progress test result of medical profession student in University of Islam Malang.

Methods: Computer based test was conducted in the beginning of academic year, consist of 200 question that met national standard, given in UKMPPD fashion in 200 minutes, using siPENA software. Total participant was 135 student of medical profession programme. Result then analysed based on

Results: Medical profession students from four teaching hospitals give similar result of progress test ($p=0,001$), showing no differences in each teaching hospital ability in preparing their students to pass national examination. Half participants (66 students) have finished 8 or more laboratories, and give similar results to those who has finished less than 8 laboratories. This result warrant further research in factors contributing in student preparedness to pass computer based test of national competency examination.

Conclusions: Different teaching hospital and number of finished laboratories is not associated with progress test result of medical profession students in University of Islam Malang.

Abstract No.JPB04

**Correlation Between Grade Point Average and License Examination
Results for Undergraduate Medical Students in faculty of Medicine
University of Abulyatama**

Syarifah Nora Andriaty
Faculty of Medicine, University of Abulyatama

Background: A good examination is meant to figure out the students progress on their learning process including their strenghts and weaknesses which are usefull for their next educational plan. Students progress can be shown from their Grade Point Average (GPA). License examination plays a role as an instrument to assess competence.

Aims: This study was aimed to determine whether GPA and license examinations is correlated.

Methods: This is a quantitativ research using cross sectional design. This research using secondary data of first taker students in Faculty of Medicine, University of Abulyatama.

Results: From the data which has been analyzed, the result shows that there was a correlation ($p= 0,001$) between the undergraduate GPA and license examination result.

Conclusions: There is a correlation between the undergraduate GPA and license examination result.

Abstract No.JPB05

Introducing Entepreneur for Medical Student: Medicopreneur

Nika Azhari Hidayat, Gathvan Ezio Rajendra
Universitas Airlangga Hospital

Background: Medical students, nowadays are left behind on the basis of a Business concept. Main Universities in Indonesia are not comprise the key role on the medical business in their future after they are graduate. Often they become only small role kind of employee in companies lead by others.

Aims: To awakening the mindsets of the stake holders in the medical education in Indonesia, introducing of medical entrepreneur is really necessary part of the curriculum.

Methods: Qualitative observational descriptions were made to students, alumni and the business environment.

Results: Many students are still confuse of the meaning of Business, they didn't realise that their lack of business knowledge could potential create low quality kind of doctors in the future.

Conclusions: Urgently need medical entrepreneur intra curriculum of medical students.

Abstract No.JPB06

Perception of Medical Students Toward E-Learning at Syiah Kuala University, Indonesia: Study at Basic of Digestive, Endocrine and Metabolic Module

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Background: E-learning is a web-based platform which has been newly adopted in Syiah Kuala University to facilitate learning processes. Particularly in Faculty of Medicine which implements Problem Based Learning (PBL) curricula, the availability of accessible resources that enables the students to gain independent learning experience is imperative. E-learning serves as one

Aims: To determine student perceptions on the implementation of E-learning in PBL Module.

Methods: We conducted a cross-sectional study in the Faculty of Medicine, Syiah Kuala University at December 2017. The survey questionnaire was self-administered, to measure student's opinion about content, accessibility and feedback of E-learning implementation in Module Basic of

Results: From 160 participants, 60% of students stated that E-learning materials are complete and appropriate with the needs. 58% of students stated that E-learning is user-friendly, while 59% of students stated that E-

learning can facilitate interaction with the teachers. However, improvement of server capacity is needed to ensure smooth experience. Increasing awareness of all parties and improving human-resources capacity are important additional aspects to optimize the use of E-learning.

Conclusions: The study reported the significant role of E-learning as a medium of learning in PBL curricula adopted by Faculty of Medicine. There are several highlighted components need to be improved

Theme C

Abstract No.JPC01

Negative Role Model in Medical Education: Be Aware...

Ita Armyanti, Jenny Bashiruddin, Rita Mustika
Faculty of Medicine, Universitas Tanjungpura

Background: The role of medical teacher as a role model was the legacy in medical education due to its impact in medical professionalism development. Role modelling is the most effective method for teaching and learning professionalism.

Aims: This research aimed to review the literature on the existence and impact of negative role model medical teacher in medical education process.

Methods: A scoping review method was conducted in this research. The Arsky and O'malley framework adopted in this study.

Results: Negative role model medical teacher exist and mostly occurred in informal and hidden curriculum. It based on negativity bias theory. There were three major characteristics of negative role model; clinical competence, teaching skills, and personal qualities. Learning from negative role model remembered easier than positive ones, because there were emotional involved. Learning outcome of negative role modelling depended on students' motivation and teachers' ability to articulate the process beyond.

Conclusions: The negative role model was medical teachers' role that always happened in medical education process. The learning process of negative role model influenced by students' motivation and teachers' articulation.

Abstract No.JPC02

Medical Student Resilience in Preventing Educational Burnout in Clinical Practice: A Literature Review

Dewi Anggraeni Kusumoningrum, Ardi Findyartini
Faculty of Medicine, Universitas Indonesia

Background: The increase in burnout percentage within medical student in clinical year often connected with low noncognitive trait, one of which was resilience. Resilience was found to be the key component in preventing burnout.

Aims: This literature review aimed to evaluate how resilience concept was perceived in medical education, its relation to burnout, and solution to nurture it in medical student.

Methods: Arkset and O'Malley's (2005) method was adopted in this literature review. We used PubMed, Scopus, and Clinical Key in literature searching. Our research questions are: 1) How the literature conceptualized resilience?, 2) How resilience influenced burnout in medical student?, 3) How to nurture resilience in medical student?

Results: A total of 19 articles were reviewed in detail. There were various resilience definition and concept. Most of the literature (79%) wrote the relation between burnout and resilience and reasons why resilience was important. Some of them came out with solution how to nurture resilience in medical student and few of it associate it with socioculture in Asia.

Conclusions: There were potential room for further research about resilience concept and how to grow resilience in medical student in clinical year especially when considering sociocultural factors in Asia.

Thank you for participating in

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