PROCEEDING BOOK

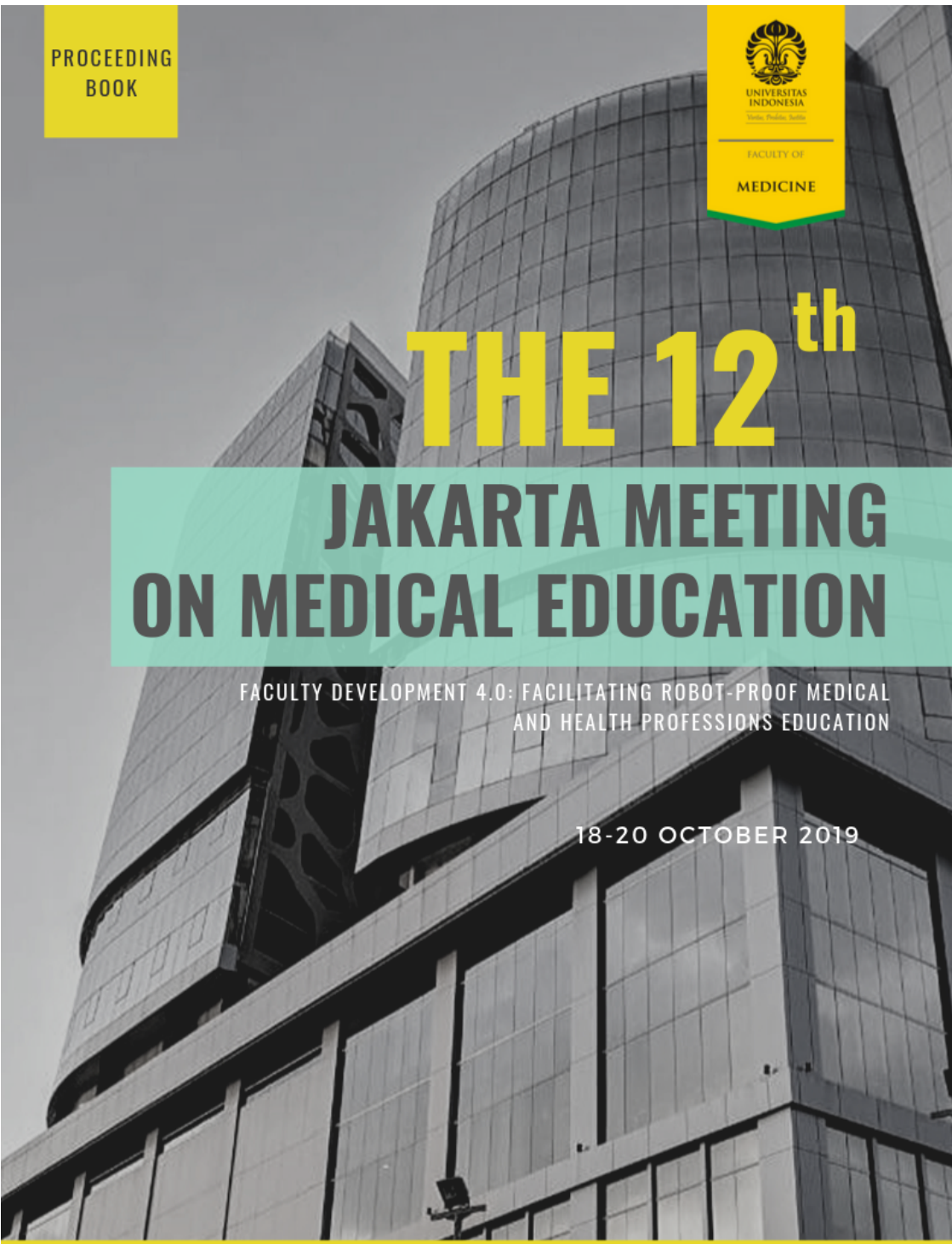
UNIVERSITAS INDONESIA

FACULTY OF MEDICINE

# THE 12th JAKARTA MEETING ON MEDICAL EDUCATION

FACULTY DEVELOPMENT 4.0: FACILITATING ROBOT-PROOF MEDICAL AND HEALTH PROFESSIONS EDUCATION

18-20 OCTOBER 2019



DEPARTMENT OF MEDICAL EDUCATION, FACULTY OF MEDICINE, UNIVERSITAS INDONESIA
IN CONJUNCTION WITH ASSOSIATION OF ACADEMIC HEALTH CENTER INTERNATIONAL (AAHCI) SOUTH EAST ASIA REGIONAL MEETING & PERHIMPUNAN PENGKAJI ILMU PENDIDIKAN KEDOKTERAN INDONESIA

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**October 2019**

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# CHAIRPERSON'S MESSAGE

The Jakarta Meeting on Medical Education (JAKMED) has been conducted for 12 years and we are proud that this meeting which was initiated by the Department of Medical Education Faculty of Medicine Universitas Indonesia and Indonesia Association of Medical Education (INAMED/PERPIPKI) in 2008, now becomes the annual meeting agenda for medical and health professions schools, educators and teachers in Indonesia and South East Asia. We have seen the increased commitment to quality of medical and health professions education and continuous effort in providing best evidence in this subject area.

Dynamic challenges in healthcare and higher education systems and needs of medical and health professionals who are capable of coping with future changes prompt us to reflect whether our medical and health professions education both in undergraduate and postgraduate levels are ready. The required literacies of the future involving data, technology and human aspects have been realized as core attributes in the revised medical and health professions schools' curricula. Such revisions require a comprehensive and well-aligned teaching-learning and assessment. Attempts to adapt should be directed to both the future needs and current characteristics of students and teachers. We do understand that the core 'engine' of all required changes are the medical and health professions teachers; hence, curriculum development for this industrial revolution 4.0 era has to integrate a systematic effort to prepare the teachers.

The 12th Jakarta Meeting on Medical Education 2019 therefore will take the very important theme 'Faculty development 4.0: Facilitating Robot-proof Medical and Health Professions Education'. The industrial revolution 4.0 era provides a lot of opportunities of technology enhanced learning in various forms. Given the need to address data, technology and human literacies in a balanced manner, we hope that the participants will be able to reflect on their roles as medical and health professions teachers in this era. In addition, we would like to highlight that there are 'robot-proof' roles and activities in the curriculum which still need the presence of teachers, especially in facilitating the development of human literacies such as empathy, perspective taking, communication skills, leadership and teamwork skills, cultural competence, design thinking skills, and so on. The theme is embedded in preconference workshops and different sessions in main conference where we aim to discuss all relevant aspects in the curriculum from the theories, current evidence and practical implications in Indonesia and South East Asia contexts.

Faculty of Medicine Universitas Indonesia has been appointed as the secretariat office of Association of Academic Health Center International (AAHCI) South East Asia region since 2017. The current JAKMED is conducted in conjunction with the

AAHCI South East Asia regional meeting which involves leadership of medical schools in Indonesia, and in collaboration with the annual meeting of Indonesia Association of Medical Education (INAMED/PERPIPKI). The topics in the plenaries, symposia, and free communication and workshops will address issues relevant not only to medical and health professions teachers and schools; they will also discuss students' perspectives and involvement. We certainly hope that the JAKMED will provide venue for all participants to share experiences and learn from each other, 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 warmly welcome you to our meeting, the 12th Jakarta Meeting on Medical Education. Hope you enjoy the conference.

Sincerely yours,

**dr. Ardi Findyartini, PhD**

Chairperson of the 12th Jakarta Meeting on Medical Education 2019

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## ACKNOWLEDGEMENTS

The 12th Jakarta Meeting on Medical Education 2019 (JAKMED 2019) is in conjunction with:

**Association of Academic Health Centers International (AAHCI) South East Asia Regional Meeting**
18 October 2019

**5th Annual Scientific Meeting of Indonesian Association of Medical Education (INAMED)**
17 October 2019

# CONFERENCE SCHEDULE

**PIT V PERPIPKI CONFERENCE**
**5th Annual Scientific Meeting of Indonesian Association of Medical Education (INAMED)**
**Thursday, October 17th, 2019**
**13.00-16.45**

| Time | Topic | Resource persons | Rooms |
|---|---|---|---|
| 13.00 | Registration | | **Teaching Theatre** IMERI FMUI Education Tower 6th floor |
| 13.00 – 13.15 | Opening ceremony (***Master of Ceremony)*** Opening speech from the Head of PERPIPKI Opening speech from the Chairperson of PIT V PERPIPKI | | |
| 13.15 – 14.45 | **Plenary Session** Exploration of Faculty Development Model in Medical Schools | Speakers: 1. Riry Ambarsarie 2. Albert Scherpbier<br>Moderator: Anwar Jusuf | |
| 14.45 – 16.45 | **Symposium** Portraying Faculty Development Program in Medical Education Institutions in Indonesia | Speakers: 1. Isti Ilmiati 2. Rita Mustika 3. Umatul Khoiriyah 4. Lukas Daniel L.<br>Moderator: Mardiastuti H. Wahid | |

**16.45- 17.45 PERPIPKI Organization Meeting**

# CONFERENCE SCHEDULE

**Pre-Conference Workshop (PCW)**
**Friday, October 18th, 2019**
**8.00 – 11.30 pm**

| Title | Resource persons | Rooms |
|---|---|---|
| PCW 01: Remediation program for struggling students *(undergraduate & postgraduate, medical and health professions)* | Rita Mustika<br>Sri Linuwih Menaldi | **Auditorium 1**<br>IMERI FMUI<br>Education Tower<br>3rd floor |
| PCW 02: Teaching students how to think like medical doctors *(undergraduate, postgraduate, medical and health professions)* | Ardi Findyartini<br>Yoyo Suhoyo<br>Theddeus OH<br>Prasetyono | **Auditorium 2**<br>IMERI FMUI<br>Education Tower<br>3rd floor |
| PCW 03: Teaching biomedical sciences using flipped classroom *(undergraduate, medical and health professions)* | Sophie Yolanda<br>Oktavinda Safitry<br>Riry Ambarsarie | **Auditorium 3**<br>IMERI FMUI<br>Education Tower<br>3rd floor |
| PCW 04: Teaching emergency skills and team collaboration using simulation *(undergraduate, medical and health professions)* | Aida Tantri<br>Andi Ade Wijaya<br>Astrid Pratidina Susilo | **Simulation Based Education and Research Center (SIMUBEAR)**<br>IMERI FMUI<br>Education Tower<br>8th floor |

# CONFERENCE SCHEDULE

**Pre-Conference Workshop (PCW)**
**Friday, October 18th, 2019**
**13.00 – 16.00**

| Title | Resource persons | Rooms |
|---|---|---|
| PCW 05: Developing meaningful portfolio in postgraduate medical education *(postgraduate, medical)* | Sandra Kemp<br>Aulia Rizka<br>Diantha Soemantri | **Auditorium 1**<br>IMERI FMUI<br>Education Tower<br>3rd floor |
| PCW 06: Revisiting PBL – how to better engage your students *(undergraduate, medical and health professions)* | Estivana Felaza<br>Mardiastuti Wahid<br>Albert Scherpbier | **Auditorium 2**<br>IMERI FMUI<br>Education Tower<br>3rd floor |
| PCW 07: Teaching medicalcommunication skills for next generation *(undergraduate, medical and health professions)* | Wresti Indriatmi<br>Endang Basuki | **Auditorium 3**<br>IMERI FMUI<br>Education Tower<br>3rd floor |
| PCW 08: How to seek and act on feedback – essential skills for medical and health professions students *(undergraduate, medical and health professions, students)* | Natalia Widiasih<br>Dwita Oktaria<br>Anyta Pinasthika | **Classroom 1**<br>IMERI FMUI<br>Education Tower<br>7th floor |

**16.30 - 18.00 Focus Group Discussion: Faculty Development Program 4.0 (by invitation only)**

# CONFERENCE SCHEDULE

**Main Conference**
**Saturday, October 19th, 2019**

| Time | Topic | Resource persons | Rooms |
|---|---|---|---|
| 07.30 – 08.00 | Registration | | **MAIN HALL** IMERI FMUI 1st floor |
| 08.00 – 08.30 | Opening ceremony (***Master of Ceremony)***<br>1. Opening speech from the Chairperson of the 12th JAKMED<br>2. Opening speech from the Dean of Faculty of Medicine Universitas Indonesia<br>3. Opening speech from representative of joint committee of Ministry of Health and Ministry of Research, Technology and Higher Education of the Republic of Indonesia | | |
| 08.30 – 09.00 | **Keynote Speech**<br>The Academic Health Center: Core Challenges and Emerging Issues | Albert Scherpbier | |
| 09.00 – 09.30 | Coffee break | | |
| 09.30 – 10.30 | **Plenary 1**<br>Faculty development 4.0: preparing teachers in medical and health professions education of the future | Speaker:<br>Dujeepa Samarasekera<br><br>Moderator:<br>Ardi Findyartini | |

| Time | Topic | Resource persons | Rooms |
|---|---|---|---|
| 10.30 – 12.00 | **Meet the expert (MTE)** | | |
| | **MTE 1 :** Portfolio development for learning purpose | Sandra Kemp | **Auditorium 1** IMERI FMUI Education Tower 3rd floor |
| | **MTE 2:** Humanistic Learning Environment | Albert Scherpbier | **Auditorium 2** IMERI FMUI Education Tower 3rd floor |
| | **MTE 3:** Curriculum Innovation in Disruptive Era | Dujeepa Samarasekera | **Auditorium 3** IMERI FMUI Education Tower 3rd floor |
| 12.00 – 13.00 | Lunch | | **MAIN HALL** IMERI FMUI 1st floor |
| 13.00 – 14.30 | **Symposium 1** Healthcare in disruptive era and the implications in medical and health professions education | Speakers:<br>1. C.Donald Combs<br>2. Ari Fahrial Syam<br>3. Albert Scherpbier<br><br>Moderator: Dwiyana Ocviyanti | |
| 14.30 – 15.00 | Coffee Break | | |

| Time | Topic | Resource persons | Rooms |
|---|---|---|---|
| 15.00 – 16.30 | **Free Papers Presentation** | | |
| | **Oral Presentations** | | |
| | Group A:<br>Students Well-being | | **Auditorium 1**<br>IMERI FMUI<br>Education Tower<br>3rd floor |
| | Group B:<br>Assessment and Student Selection | | **Auditorium 2**<br>IMERI FMUI<br>Education Tower<br>3rd floor |
| | Group C:<br>Teaching Learning and Faculty Development | | **Auditorium 3**<br>IMERI FMUI<br>Education Tower<br>3rd floor |
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# CONFERENCE SCHEDULE

**Main Conference**
**Sunday, October 20th, 2019**

| Time | Topic | Resource persons | Rooms |
|---|---|---|---|
| 08.00 – 08.30 | Registration | | **MAIN HALL** IMERI FMUI 1st floor |
| 08.30 – 09.30 | **Plenary 2** Assessing future medical and health professionals | Speaker: Sandra Kemp<br><br>Moderator: Diantha Soemantri | |
| 09.30 – 10.00 | Coffee break | | |
| 10.00 – 12.00 | **Panel Discussion 1** Preparing teachers for robot proof medical and health professions education in Indonesia | Panelists:<br>1. Pauline Pannen<br>2. Anis Fuad<br>3. Budi Wiweko<br><br>Moderator: Nani Cahyani Sudarsono | |
| 12.00 – 13.00 | Lunch | | |

| Time | Topic | Resource persons | Rooms |
|---|---|---|---|
| 13.00 – 15.00 | **Student Symposium**<br>Students' innovation and entrepreneurship to adapt to industrial revolution 4.0 | Opening Remarks:<br>Dujeepa Samarasekera<br><br>Speakers:<br>1. Dani M. Trianto & M. Aji Muharom (Healthpoint.id)<br>2. Siti Aisyah Ismail (IMANI-PROKAMI)<br><br>Moderator:<br>Anwar Jusuf<br>Anyta Pinasthika | **MAIN HALL**<br>IMERI FMUI<br>1st floor |
| 15.00 – 15.30 | Best oral and poster presentation<br><br>Closing ceremony and introduction of the 13th Jakarta Meeting on Medical Education | | |

# PIT V PERPIPKI

**Pertemuan Ilmiah Tahunan V Perhimpunan Pengkaji Ilmu Pendidikan Kedokteran (PERPIPKI)**

**5th Annual Scientific Meeting of Indonesian Association of Medical Education (INAMED)**

17 October 2019

Teaching Theatre, Education Tower, 6th Floor

IMERI Building, Faculty of Medicine Universitas Indonesia, Jakarta

**PIT V PERPIPKI**

**Plenary Session**

## Faculty Development in Medical Schools

Thursday, October 17th 2019
13.15-14.45

**Speakers:**

1. Professor Albert Scherpbier
2. Riry Ambarsarie, dr., MPdKed

**Moderator:** Prof. dr. Anwar Jusuf, SpP(K)

**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 interests in medical education are quality assurance, professionalisation of medical education, career prospects for medical teachers, involvement of medical students in improving the quality of education, and medical education research. He has published extensively on medical education research. He published more than 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 supervises national and international PhD students (more then 60 finished). He 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).

**Riry Ambarsarie, dr., MPdKed** obtained her master of medical education degree from Faculty of Medicine Universitas Indonesia and currently a lecturer and Head of Medical Education Unit at the Faculty of Medicine and Health Science University of Bengkulu. Her interest in faculty development

made her focus on how to improve the competence of faculty as a form of effort to improve the quality of medical education.

**Prof. dr. Anwar Jusuf, SpP(K)** is a professor in pulmonology. Currently, he is actively involved in the actively involved in the activities of Indonesian Doctor Council especially as medical education committee. Aside from his clinical and organizational activities, he is also a lecturer in Master Program in Medical Education FMUI since 2006. He conducts research and publishes articles in local and international journal.

**Abstract**

## Faculty development in medical schools in the Netherlands: sharing and reflection

*Prof. Dr A.J.J.A. Scherpbier*

In the Netherlands, teaching the teachers is very common nowadays. In some universities, you can make career in education even towards the role as professor. In all universities, educational quality plays a role in career of staff members. These above-mentioned consequences are important to give faculty development a real chance, and to make it worthwhile to spend time and money in faculty development. There is a Dutch working group on faculty development since 2005. They have described the competencies of a teacher and published that in a Dutch Journal for Education and in Medical Teacher (2009: 390-396). The group meets three-four times each year and takes care for workshops at the yearly conference (the Dutch federation for Medical Education). The goal is to exchange and learn from each other. All universities have a basic educational qualification for their teachers. Teachers need this qualification to teach and to make career. There are also senior qualifications and master programs. The working group is working at feedback opportunities and the relation with educational quality.

## Exploration of Faculty Development Models in Medical Schools

*dr. Riry Ambarsarie, MPdKed*

The quality of an educational program is highly determined by the quality of the faculty, including in medical schools. However medical schools in developing countries are still facing difficulties, not only in improving the quality of education, but also firstly in recruiting faculty members. Most of the time the focus is on fulfilling a quantity of faculty members without adequate consideration of their teaching competencies. A faculty development model will help formulate programs that may accommodate faculty members' needs as well as academic and institutional demands. Components of the model can be grouped into three major categories: 1) content, which is materials that needs to be delivered in faculty development; 2) process components that depict aspects related to the preparation, execution and evaluation of sustainable faculty development programs; and 3) components in the educational system that affect faculty development program implementation. Through this model, it is expected that institutions, especially in developing countries, will be able to prepare a more comprehensive and sustainable faculty development program.

**PIT V PERPIPKI**

**Symposium**

## Portraying Faculty Development Program in Medical Education Institutions in Indonesia

Thursday, October 17th 2019
14.45-16.45

**Speakers:**

1. Dr. dr. Isti Ilmiati, M.Sc.CM-FM, MPdKed
2. dr. Rita Mustika, M.Epid
3. dr. Umatul Khoiriyah, MMedEd
4. dr. Lukas Daniel L., M.Kes, MPdKed, MSc.

**Moderator:** Dr. dr. Mardiastuti H. Wahid, Sp.MK(K), M.Sc.

**Curriculum Vitae**

**Dr. dr. Isti Ilmiati, M.Sc.CM-FM, MPdKed** was born in Malang in 1967. She has been a teaching staff in Community Medicine Department, Faculty of Medicine, Universitas Sumatera Utara since 1999. She achieved a reward as outstanding lecturer in 2005. She is currently a Dean Expert Staff of FM-USU. She obtained her medical degree in FM-USU in 1992, worked at the Namorambe Community Health Center in Deli Serdang Regency, North Sumatra until 1997. In 2000, she obtained a Professional Family Medicine Expert degree from the Indonesian Family Physician College, before continuing her Masters degree in family medicine at the University of The Philippines, Manila on an ADB-Loan scholarship. She obtained a degree in master in medical education in 2008 at University of Indonesia under the HWS Project. She developed curriculum in FM-USU and became Chair of MEU in 2011-2014. She completed Doctoral education in 2016, with a sandwich program from Kemenristekdikti in Flinders University Medical School and Health Sciences, Adelaide, South Australia, 2015. In the same year, she received a professional degree from the Association of Indonesian Community Health and Community Medicine (PDK3MI) as a Fellow of Indonesian Society of Public Health and Fellow of the Indonesian Society of Community Medicine. Becoming the Chairperson of the Indonesian Family Medicine College (KIKKI), which was established by PB-IDI in 2017, she became a forum for implementing medical education in post graduate education.

**dr. Rita Mustika, M.Epid is a**senior lecturer of medical education Universitas Indonesia, serving as head of medical education collaboration cluster (MECC IMERI-UI). Under her leadership, MECC has piloting the collaboration model. Her other responsibilities include faculty development and professional formation curriculum. She's also involved in national mentoring-coaching program. Recently, she explores humanistic climate in medical education for her PhD project.
The establishment of several new medical schools in Indonesia has been assisted under her coordination as head of partnership unit. She earned medical degree from Gadjah Mada University, master of clinical epidemiology from UI and received training in dermatology at Kobe University.

**dr. Umatul Khoiriyah, MMedEd** finished the Under graduate and Master of Medical Education program in Gadjah Mada University Yogyakarta. Graduated from the Doctoral program in School of Medicine , University of Sydney in 2016. The current job is as Head of Under Graduate Program in Medicine, Faculty of Medicine Universitas Islam Indonesia. The research interest regarding to self-assessment, PBL tutorials, staff development, clinical learning environment etc

**dr. Lukas Daniel L., M.Kes, MPdKed, MSc.** was born in Medan, December 17, 1973, is a lecturer in Faculty of Medicine, Universitas Mulawarman, Samarinda. He is a staff at Department of Pharmacology and Department of Medical Education. He graduated from FM USU as MD in 1998 and from FM UB, Malang (M.Kes), FM UI, jakarta (M.Pd.Ked), and School of Health Education, Maastricht University (SHE MU), Netherlands (M.Sc in HPE) in 2003, 2008, and 2013, respectively. He is actively as a member of Indonesian Skills Laboratory Network and Development (ISLaND). Now, he is a first year PhD student in SHE MU with a main topic research in Faculty Development in PBL implementation and Asia context.

**Abstract**

## Portraying Faculty Development Program in Medical Education Institutions in Indonesia: Information and Communication Technology Based Learning

*Dr. dr. Isti Ilmiati Fujiati, MSc.CM-FM, MPdKed*

The development of information and communication technology (ICT) is moving so fast, reaching all sectors including medical education. In its development, ICT is better known as "computer media" which is used as a medium of learning, both offline and online that are connected to the internet. Various learning methods are developed such as Computer Based Learning (CBL), Online Learning or Web Based Learning, e-learning, and so on, with a special role as a learning medium that conveys messages to students. ICTs enhance interaction, make learning more interesting, manage learning more effectively and efficiently, and as part of efforts to improve the quality of learning. Advances in digital technology make a teaching staff demanded to be able to adapt and adopt digital technology as part of its professionalism. Cultural transformation towards the optimization of e-learning has a significant impact on changes in blended learning patterns that combine face-to-face learning and online learning. We strive to portray the development of the capabilities and perceptions of teaching staff in information and communication technology-based learning in 6 (six) Medical Education Institutions in Medan, including the readiness of institutions in preparing infrastructure, and managing the learning web.

## Faculty Development in Medical Education Institution in Indonesia: A Snapshot

*dr. Rita Mustika, M.Epid*

The shifting paradigm in medical education from teacher-centered to student-centered followed by advancement in technology in industrial revolution 4.0 era make faculty development a necessity. Medical institution obliges to equips teachers with pedagogical skills, content expertise, leadership and collaborative skills. However, evidence about faculty development program in medical institution in Indonesia is still sparse. We explored the faculty development initiative in Indonesian medical institution. We explored 48 medical institution leaders' perspective on faculty

development through 6 Focus Group Discussion. Furthermore, we surveyed 72 Accredited medical education Institution, forty-eight respondents (67%) answer the questionnaire. Our study revealed that faculty development program was implement sporadically. Medical Institutions' leader still focuses on the quantity of medical faculties. Moreover, formal post-graduate and training still prioritized. Survey result show all medical institution does not have a specific unit providing faculty development program. Sixteen percent of medical institution does not provide faculty development program. Most training for medical teacher were organized by medical education unit (84%). Even though the training mostly intends to develop teaching-learning skills (92%), content of training was focus on curriculum planning and design (78%). Workshop and seminar were the preferable format of faculty development program (86% and 90%). Formal post-graduated still prioritized (22%). Medical education Institution in Indonesia vary in term of size and development. Medical education leaders still focus on fulfilling quantity of medical faculties, so that faculty development program has not been design systematically. Impact on the quality of teaching-learning process still need to be explored further.

## Staff Development in Faculty of Medicine Universitas Islam Indonesia: Viewing through Activity Theory Lens

*dr. Umatul Khoiriyah, MMedEd*

Staff development is one of the main programs in each educational organization since it has crucial roles in giving the direction of an institutional capability. Activity theory could be used as a theoretical lens to capture the elements connecting to staff developments and the intended outcome. Activity theory is a theory describing the interaction among subjects, tool, rules, object, community and division of labour in obtaining the desired outcome.

Applying activity theory in the staff development context, the subject is the educational staff while the object is the individual capabilities in achieving catur dharma (education, research, community service and da'wah. The achievement of the objective is usually measured based on UII's internal standard which is called MERCY of GOD (Management of organization and human resources, Education, Research, Community services, Yield of services, Output, Facilities, Governance, Outcome and Collaboration and

Da'wah Islamiyah). There are specific rules regarding staff development in Faculty of Medicine Universitas Islam Indonesia ( FM UII) which are in line with the university and or governmental rules. Many opportunities and facilities are offered by both faculty or university for all staffs in FM UII to increase their capabilities in each component of catur dharma. The educational staffs are facilitated to perform their capabilities not only in the regional or national level but also at the international level. All of the processes regarding staff development in FM UII is under the coordination of head of medical department by collaborating with the relevant units such as Medical Education Unit (MEU) and unit of research and community services (UPPM). Through orchestrating all of the elements in staff development properly, the desired outcome which is enlargement of institution capability would be achieved optimally.

## Developing Teacher's Conception of Teaching in a Curriculum Change in A Strong Hierarchical Context

*dr. Lukas Daniel Leatemia, M.Kes, M.Pd.Ked, M.Sc*

The curriculum change from the traditional curriculum to the PBL curriculum is a challenge for teachers in countries with a strong hierarchical culture. They still struggle with facilitating student-centered behavior, particularly in terms of authority, the hierarchical student-teacher relationship, and students' critical thinking enhancement. Since PBL is derived from western concepts, the Asian teachers need more effort to adapt the PBL process, its practice, and its philosophy. However, faculty development programs that have been conducted by institutions to change teacher's behavior to perform student centered approach seem too limited attention for developing professional conceptions of teachers. Most of the programs focus on improving teachers' competencies in knowledge and teaching skills. Whereas the conception of teaching is an important role to determine the teaching approaches. Reflection is one of methods that can help develop the personal conceptions of teachers because it is an expression of personal beliefs related to teaching. To change the personal conception using reflection, teachers should realize their limitation and step forward to improve their belief, behavior and competencies. By doing this, the power of change will come from their own rather than from their environment. They are guided as a personal autonomy to become aware to choose whether or not to allow the limitation to control their behavior. With

appropriate guidance, the conception of teachers is supposed to be shifted away from teacher-centered to consciously adopt student-centered conception.

# PRE-CONFERENCE WORKSHOPS

8.00 – 11.30 & 13.00 – 16.00

18 October 2019

IMERI Building, Faculty of Medicine Universitas Indonesia, Jakarta

**08.00 – 11.30**

**PCW 1: Remediation Program for Struggling Students**
*Rita Mustika, Sri Linuwih Menaldi*

**PCW 2: Teach Medical Students How to Think Like Medical Doctors**
*Theddeus OH Prasetyono, Yoyo Suhoyo, Ardi Findyartini*

**PCW 3: Teaching Biomedical Sciences Using Flipped Classroom**
*Sophie Yolanda, Oktavinda Safitry, Riry Ambarsarie*

**PCW 4: Teaching Emergency Skills and Team Collaboration Using Simulation**
*Aida Rosita Tantri, Andi Ade Wijaya, Astrid Pratidina Susilo*

**13.00 – 16.00**

**PCW 5: Developing a Meaningful Portfolio in Postgraduate Medical Education**
*Sandra Kemp, Aulia Rizka, Diantha Soemantri*

**PCW 6: Revisiting PBL – How to Better Engage Your Students**
*Albert Scherpbier, Estivana Felaza, Mardiastuti Wahid*

**PCW 7: Teaching Medical Communication Skills for Next Generation**
*Endang Basuki, Wresti Indriatmi*

**PCW 8: How to Seek and Act on Feedback – Essential Skills for Medical and Health Professions Students**
*Natalia Widiasih, Dwita Oktaria, Anyta Pinasthika*

**Pre-Conference Workshop 1**

## Remediation Program for Struggling Students

Friday, October 18th 2019, 08.00 – 11.30
Auditorium 1, 3rd Floor Education Tower, IMERI Building

**Speakers:**

1. Rita Mustika
2. Sri Linuwih Menaldi

**Curriculum Vitae**

**Rita Mustika**, senior lecturer of medical education Universitas Indonesia, serving as head of medical education collaboration cluster (MECC IMERI-UI). Under her leadership, MECC has piloting the collaboration model. Her other responsibilities include faculty development and professional formation curriculum. She's also involved in national mentoring-coaching program. Recently, she explores humanistic climate in medical education for her PhD project.

The establishment of several new medical schools in Indonesia has been assisted under her coordination as head of partnership unit. She earned medical degree from Gadjah Mada University, master of clinical epidemiology from UI and received training in dermatology at Kobe University.

**Dr. Sri Linuwih Menaldi** is a lecturer at the Faculty of Medicine, Universitas Indonesia (FMUI) since 1994. She graduated as Medical Doctor from FMUI in 1981. As an MD, she worked in regional hospital at Bukittinggi, West Sumatra in 1982-1985. She finished her training as Dermatovenereologist in 1992 and has been medical staff of Tropical Infection Division Department of Dermatology and Venereology FMUI since 1994. She started to be involved in undergraduate education program as coordinator of undergraduate program in Department of Dermatology and Venereology FMUI in 2004-2012. She was a coordinator of fourth year medical students in 2008-2012 and coordinator of regular batch of medical students in 2008-2012. She pursued a doctorate degree in Medical Education from Faculty of Medicine Universitas Gadjah Mada. She has become faculty member of Department of Medical Education FMUI since 2014. She is currently the

head of Tropical Infection Division Department of Dermatology and Venereology FMUI-RSCM.

**Background**

Remediation is a process of facilitating students who are not on course to competence. Remediation remains a challenge in medical education, as various aspects are being considered in conducting remediation, such as individual well-being, ability, motivation, personality and organisational factors. Poorly managed, remediation could have the opposite effect of lack of engagement from students. However, well-designed remediation process could support an individual back on course to competence.

**Summary**

In this workshop participant will develop their own remediation for struggling students in their own context. In order to do that, first participants will be encouraged to discuss the characteristics of current students and problems that causing them to struggle according to their experiences. They would also discuss about learning climate that perceived by those students and relation with their well-being. Resource person will share an examples of remediation program for struggling student that already exist. Once they understand the students, their problems and how to remediate them, participants will be facilitated to develop their own context of remediation program.

**Objectives**

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

1. Identify characteristics of current medical students
2. Identify the causes of struggling students
3. Develop remediation programs for struggling students in their own context

**Scope of discussion**

1. Characteristics of current medical students
2. How to identify struggling students and common cause of their problems
3. Remediation program for undergraduate and post-graduate medical education

**Activities**

| Time | Session | Resource persons |
|---|---|---|
| 08.00-<br>08.15 | Pre-test | Committee |
| 08.15-<br>09.00 | Ice-breaking and overview<br>Discussing characteristics of current medical students | Rita Mustika |
| 09.00-<br>09.45 | How to identify struggling students and common cause of their problems | Sri Linuwih Menaldi |
| 09.45-<br>10.15 | Examples of remediation programs for struggling students | Daniel R Kambey |
| 10.15-<br>10.45 | Group discussion:<br>Developing remediation program | Rita Mustika<br>Sri Linuwih Menaldi<br>Daniel R Kambey |
| 10.45-<br>11.15 | Plenary and closing | Sri Linuwih Menaldi |
| 11.15-<br>11.30 | Post-test | Committee |

**Reading materials**


1. Borges NJ, Manuel RS, Elam CL & Jonnes BJ (2010) Differences in motives between millennial and generation X medical students. Medical Education 2010: 44: 570–576
2. Adina Kalet, Jeannette Guerrasio & Calvin L. Chou (2016) Twelve tips for developing and maintaining a remediation program in medical education, Medical Teacher,38:8, 787-792

**Pre-Conference Workshop 2**

## Teach Medical Students How to Think Like Medical Doctors

Friday, October 18th 2019, 08.00 – 11.30
Auditorium 2, 3rd Floor Education Tower, IMERI Building

**Speakers:**

1. Theddeus OH Prasetyono
2. Yoyo Suhoyo
3. Ardi Findyartini

**Curriculum Vitae**

**Theddeus O.H. Prasetyono, M.D., PhD**. is a Hand and Microsurgery Consultant in Plastic Surgery, Cipto Mangunkusumo Hospital/ Universitas Indonesia. He is also the chairman of ICTEC (Indonesian Clinical Training and Education Center) in the same hospital and university. Dr. Prasetyono did his training in plastic surgery at the Universitas Indonesia. He took his fellowship training in Reconstructive Microsurgery and Hand and Microsurgery in the United States. His main area of interest and research are in the field of non-tourniquet technique of hand surgery and flap surgery, besides vascular anomaly, aesthetic surgery, and training & education.

Currently, he is an active member and official bearer of several national and international organizations, such as Indonesian Society for Surgery of the Hand, OSAPS (Oriental Society of Aesthetic Plastic Surgery), and ISAPS (International Society of Aesthetic Plastic Surgery). He is the founding member of ASBPRS (Asian Society of Breast Plastic Reconstructive Surgeons). Just recently he joined the Board of Directors of Rhinoplasty Society of Asia. He has published numerous papers in scientific journals, mostly in hand surgery; and also written books. In addition, he is also listed as an editor and reviewer for several national and international journals, including Hand Surgery, APS (Archives of Plastic Surgery), Aesthetic Plastic Surgery, Arch Craniofacial Surgery, Journal of Surgical Research, etc.

He actively participates in various seminars, trainings, and scientific meetings, both as participants and speakers. He also has long years of experiences in organizing international events as well. Among those

academic trips, they include visiting professorship to Asan Medical Center (Department of Orthopedic), Korea, 2012; twice to Kaohsiung Medical University (Department of Plastic Surgery, 2011 & 2013); Soonchunhyang University (Department of Plastic Surgery, College of Medicine), Korea 2015; Department of Surgery (Division of Plastic Surgery), College of Medicine, Philippine General Hospital, Manila, Philippine, 2019; Grigori T. Popa University (Department of Plastic Surgery)/ Institul Regional de Oncologie, Iaśi, Romania, 2019; Department of Orthopaedics Saiseikai Otaru Hospital/ Sapporo Medical University, Japan. Being an External Examiner at the MS (Plastic Surgery) Program Reconstructive Sciences Unit USM, Malaysia was part of his passion in training & education. Dr. Prasetyono has published 69 papers (41 in international journals indexed by Pubmed and Scopus) and 22 books and chapters.

**Yoyo Suhoyo** graduated as medical doctor in 2005 and master of medical education in 2008 from Faculty of Medicine Universitas Gadjah Mada (FM-UGM). In 2018, he finished my doctoral degree in medical education at the Groningen University, the Netherlands. He was the Fellow of the FAIMER Institute 2014, in Philadelphia, USA. He is also the member of the editorial board of the Indonesian Journal of Medical Education. He started his work in the field of medical education as a research-assistant at the Department of Medical Education FM-UGM from 2000 until 2007. Since 2008, he has been working as teaching staff and researcher, and actively involved in conducting innovation, faculty development, researches and writing publications on medical education area. Now, he is the chairman of students' assessment team of medical school, and coordinator of educational development for clerkship program. His works has been published in national and international journal such as Medical Teacher, Medical Education, and BMC Medical Education.

**dr. Ardi Findyartini, PhD** is currently the Head of Department of Medical Education, Faculty of Medicine, Universitas Indonesia. She graduated as medical doctor from FMUI in 2002 and completed her PhD in medical education from Melbourne Medical School, Faculty of Medicine Dentistry and Health Sciences, University of Melbourne in 2012. She is also the Head of Medical Education Unit of FMUI and the Head of Medical Education Center Cluster at IMERI, FMUI. She has been actively involved in the curriculum development of undergraduate and postgraduate medical programmes and in conducting faculty development programs in FMUI and

at the national and international levels. She has been publishing scholarly works and contributing in the review process in national and international peer reviewed journals and conferences. Her research interest are in the curriculum development, interprofessional education and interprofessional collaborative practice, professional development, clinical reasoning, student's adaptation and transition and socio-cultural related issues in medical and health professions education.

**Background**

'How to think like medical doctors' pertains to the cognitive process required for analysing and synthesising the patient data and deciding the most appropriate diagnosis and treatment plan, or clinical reasoning skills. Effective clinical reasoning skills require biomedical and clinical knowledge, clinical experience and metacognition. Medical students acquire the skills during their medical training and it is indeed a developmental process which needs to be well supported. Medical students are novices with unorganized knowledge and limited clinical experience, hence there should be strategies to promote the development of clinical reasoning skills which consider the milestones of development in medical training. In regards to this, clinical teachers in clinical learning environment may have pivotal roles in nurturing the development of the skills. This workshop aims to discuss the principles of teaching clinical reasoning and the importance of teaching clinical reasoning skills explicitly. Strategies for teaching clinical reasoning skills will also be demonstrated and exercised during the workshop.

**Summary**

The workshop will highlight principles of teaching clinical reasoning skills in busy clinical settings with appropriate techniques that can be implemented by clinical teachers/supervisors.

**Objectives**

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

1. Elaborate the principles of clinical reasoning skills
2. Explain the principles of clinical reasoning skills teaching in medical education
3. Describe strategies to teach clinical reasoning skills explicitly
4. Demonstrate the strategies to teach clinical reasoning skills using scenarios

**Scope of discussion**

1. Principles of clinical reasoning skills
2. Principles of clinical reasoning skills teaching
3. Strategies to teach clinical reasoning skills in clinical setting
4. The power of feedback in clinical reasoning skills teaching

**Activities**

Within 4 hour workshop, the activities will be as follows:

| Session | Description | Time | Person in charge |
|---|---|---|---|
| Opening – ice breaking and clinical learning situations | The workshop facilitators and participants will introduce themselves. PIC will trigger the reflection on clinical learning situations from different participants' perspectives. Participants are also encouraged to reflect on how clinical reasoning skills have been taught in their settings. | 30 minutes | Teddy OH Prasetyono<br>Ardi Findyartini<br>Yoyo Suhoyo |
| Interactive lecture – principles of clinical reasoning skills | The session will elaborate the key principles of clinical reasoning skills and the development | 20 minutes | Ardi Findyartini |
| Groupwork 1 – principles of clinical reasoning teaching | Participants will identify the clinical reasoning skills teaching strategies through discussing some clinical learning situation scenarios/videos | 30 minutes | Teddy OH Prasetyono<br>Ardi Findyartini<br>Yoyo Suhoyo |
| Interactive lecture – Strategies to | The session will elaborate several strategies to teach | 20 minutes | Teddy OH Prasetyono |

| Session | Description | Time | Person in charge |
|---|---|---|---|
| teach clinical reasoning skills for medical students | clinical reasoning skills for medical students | | |
| Interactive lecture – The power of feedback in teaching clinical reasoning skills | The session will elaborate the importance of feedback in teaching clinical reasoning skills for medical students | 20 minutes | Yoyo Suhoyo |
| Groupwork 2 – strategies to teach clinical reasoning skills | Participants will conduct a series of roleplay of clinical reasoning teaching session in clinical setting using scenarios | 45 minutes | Teddy OH Prasetyono<br>Ardi Findyartini<br>Yoyo Suhoyo |
| Plenary and closing remarks | Participants will be encouraged to reflect on the activities and take important practical points for clinical reasoning teaching | 45 minutes | Teddy OH Prasetyono<br>Ardi Findyartini<br>Yoyo Suhoyo |

**Reading materials**


1. Rencic J (2011). Twelve tips for teaching expertise in clinical reasoning. Medical Teacher 33: 887-892
2. Ramani S & Krackov SK (2012). Twelve tips for giving feedback effectively in the clinical environment. Medical Teacher, Early online: 1-5

**Pre-Conference Workshop 3**

## Teaching Biomedical Sciences Using Flipped Classroom

Friday, October 18th 2019, 08.00 – 11.30
Auditorium 3, 3rd Floor Education Tower, IMERI Building

**Speakers:**

1. Sophie Yolanda
2. Oktavinda Safitry
3. Riry Ambarsarie

**Curriculum Vitae**

**Sophie Yolanda** is a teaching staff at the Department of Physiology, Faculty of Medicine Universitas Indonesia (FMUI). She has been a lecturer since 2006. She is currently the coordinator of undergraduate education of the Department of Physiology FMUI. She also holds the position of academic coordinator in Medical Education Unit (MEU) FMUI. She was also the vice coordinator of International Class Faculty of Medicine Universitas Indonesia for three years starting at 2013.
In education, she has been awarded as one of the best lecturers and facilitators (in PBL discussion) for seven years in a row since 2013. Her teaching topics range from human physiology in general for undergraduate students to specifically her research interest, neurophysiology, for graduate students. She has been implementing flipped classroom in one of her lectures since 2016.

**dr. Oktavinda Safitry, SpFM(K), MPdKed** graduated as medical doctor from FMUI in 1999, completed her forensic medicine specialist also in FMUI. Her deep involvement in medical education started when she was appointed as the secretary to the FMUI's forensic medicine specialist study program in 2006. Then, she was appointed as the head of forensic medicine specialist study program from 2008 to 2018. She currently is the member of FMUI's Medical Education Unit concentrating on clinical clerkship. She was involved in the development of various modules in FMUI undergraduate program and also for the forensic medicine specialist program from 2005 up till now, among them are the musculoskeletal module, the bioethics and medical law module, the disaster management module, forensic medicine clinical

practice module, and the religion and spirituality module. She is also active in Indonesian college of Forensic Medicine.

**Riry Ambarsarie, MD, MMedEd** is a lecturer at Department of Medical Education Faculty of Medicine and Health Sciences Universitas Bengkulu. Graduated as a medical doctor in 2011 from Faculty of Medicine Maranatha Christian University, she then pursued a master degree in medical education from Faculty of Medicine Universitas Indonesia in 2018. Her research interest is in faculty development.

**Background**

Flipped classroom is an educational model in which the standard lecture and homework elements of a course are “reversed” or “flipped”. It will provides an opportunity for students to study the course-related materials at their own pace and schedules prior to the actual class commencement. The notion of “flipped classroom” is an emerging concept in education which is gaining much popularity.The millennial students are quiet adaptive in using technology and prefer this mode for teaching and learning. They are comfortable while learning in social situations. Therefore it is imperative to seek ideas that utilize e-learning technologies as potent promoters for active self- directed deeper learning in our education systems. This workshop will address the strategic components towards effective flipped classroom and its application in teaching biomedical sciences.

**Summary**

Flipped classroom is an educational model in which the standard lecture and homework elements of a course are “reversed” or “flipped”. This workshop will address the strategic components towards effective flipped classroom and its application in teaching biomedical sciences. In this workshop, not only about the concept will given, but also know how to design an effective flipped clasroom, like how to make the best use of your face-to-face time with students and also get more class-time for hands-on activities and how to assess it.

In the end, the participants will have time to create their own design of flipped class with expert support.

**Objectives**

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

a. Explain the concept of flipped classroom
b. Understand the best practices in flipped classroom
c. Design a flipped classroom session
d. Assess a flipped classroom

**Scope of discussion**

1. The concept of flipped classroom
2. The stages of flipped classroom implementation
3. The flipped learning material
4. The assessment of a flipped class

**Activities**

| Time | Session |
|---|---|
| 10 minutes | Ice breaking |
| 10 minutes | Introduction to the workshop |
| 20 minutes | Interactive lecture: the concepts of flipped classroom |
| 10 minutes | Q & A |
| 30 minutes | Group work: planning a flipped classroom |
| 20 minutes | Sharing how to plan a flipped classroom |
| 20 minutes | Group work: implementing a flipped classroom |
| 30 minutes | Simulation of a flipped classroom |
| 20 minutes | Debriefing |
| 10 minutes | Wrap up and closing |

**Reading materials**


1. Moffett J. Twelve tips for “flipping” the classroom. Medical Teacher. 2015. 37:4, 331-336.
2. Sharma N., Lau C S., Dohert I., Harbutt D. How we flipped the medical classroom. Medical Teacher. 2015; 37:327-330.
3. Hurtubise et al. The Flipped Classroom in Medical Education: Engaging Students to Build Competency. Journal of Medical Education and Curricular Development. 2015:2 35–43 doi:10.4137/JMECD.S23895.

**Pre-Conference Workshop 4**

## Teaching Emergency Skills and Team Collaboration Using Simulation

Friday, October 18th 2019, 08.00 – 11.30
SIMUBEAR Cluster, 8th Floor Education Tower, IMERI Building

**Speakers:**

1. Aida Rosita Tantri
2. Andi Ade Wijaya
3. Astrid Pratidina Susilo

**Curriculum Vitae**

**Aida Rosita Tantri** is a clinician, researcher, and in Department of Anesthesiology and Intensive Care, Faculty of Medicine, Universitas Indonesia – Cipto Mangunkusumo General Hospital. Currently, she is the Head of Simulation-Based Medical Education and Research Center (SIMUBEAR) at Indonesia Medical Education and Research Institute (IMERI). Her role as Head of SIMUBEAR was to organize and conduct simulation-based education in the medical and health fields in accordance with the highest education standard and good clinical practice. She is also responsible in facilitate and conduct researches in the field of simulation-based medical education. Under her direction, SIMUBEAR have created organizational capabilities, infrastructure, building resources for educators who wish to use innovative simulation-based learning for teaching and assessment.

**dr. Andi Ade W Ramlan, SpAn, PhD** is a pediatric anesthesiologist. currently she is a medical staff of Pediatric Anesthesia Division Department of Anesthesiology Faculty of Medicine Universitas Indonesia. She is also the Head of Emergency Services, Universitas Indonesia Hospital.
She graduated as medical doctor from FMUI in 1996 and completed her anesthesia residency program from FMUI in 2004. She got the PhD degree in Neuroscience from FMUI in 2017.
She was trained for Simulation in Medical education in WISER, University of Pittsburgh Medical Center, USA in 2010. She also a member of Pan Asia Simulation Networking.

She has been actively involved in the curriculum development of undergraduate medical programmes for anesthesia and emergency subjects. She run simulation teaching for medical students and anesthesia residents as the integrated part of the curriculum. She also develops simulation training for Anesthesiology CME program.
Her research interests are in the subject of pediatric anesthesiology, airway management, and medical education.

**dr. Astrid Pratidina Susilo, MPH, Ph.D., SpAn** is a researcher in Health Professions Education and Public Health, and an anesthesiologist at Adnaan WD General Hospital in Payakumbuh West Sumatera. She graduated as a Medical Doctor from Universitas Airlangga and as an Anesthesiologist from Universitas Indonesia. She obtained a Master of Public Health and a Ph.D. in Health Profession Education from Maastricht University in the Netherlands. She has extensive teaching experience in undergraduate, postgraduate, and continuing education setting for medical students, pharmacists, and nurses at different academic and healthcare institutions. Astrid is actively involved in the Indonesian Skills Laboratory Network and Development (ISLaND), a national team that contributes to the development of skills training for health professions in Indonesia. Her research interests are interprofessional collaboration, communication skills training, and patient safety. She has published books and articles in national and international journals related to those topics.

**Background**
The growing complexity of patient care encourages health professionals, such as physicians and nurses working in emergency setting, to master, not only knowledge and procedural skills, but good teamwork in coordinating patient care as well. They have to work collaboratively among team members in real practice. Consequently, education program for health professionals must train these skills systematically. However, teamwork-based competencies are relatively new in health care practices. Thus, there is a gap between each method to accomplish this goal.

Teamwork training for health professionals and students can be accomplished by employing simulation-based training (SBT) techniques. Those techniques consist of tools and strategies to design structured learning experiences and measurement tools that are explicitly linked to

targeted teamwork competencies and learning objectives. Designed for teachers or professionals involved in the skills training for emergency team, this workshop aims to introduce the basic skills to design simulation scenario, to conduct an emergency simulation-based learning with high-fidelity manikin, and to assess and debrief learners using appropriate measurement tools.

**Summary**

Teamwork training in emergency setting for health professionals can be accomplished by occupying simulation-based learning approaches. This workshop is designed for teachers or professionals who are dedicated in the development and teaching of skills training for emergency team. We aim to introduce the basic skills to design simulation scenario, to conduct an emergency simulation-based learning with high-fidelity manikin, and to assess and debrief learners using appropriate measurement tools after having simulation sessions. In this workshop, participants will have the opportunity to experience an Emergency Simulation-Based Learning session using high-fidelity manikin in Simulation Based Medical Education and Research Center (SIMUBEAR) IMERI. To encourage participants to apply the obtained skills in their own institutions, some practical and feasible approaches will be intensively discussed.

**Objectives**

At the end of the workshop, the participants are able to explain the following basic principles:

1. To understand the importance of good skill and teamwork in emergency practice
2. To compile specific learning objectives of teamwork and emergency skills in simulation-based learning.
3. To design simulation scenarios in emergency practice.
4. To conduct an emergency simulation-based learning with high-fidelity manikin.
5. To assess teamwork skills in simulation-based learning using appropriate measurement tools.
6. To conduct a proper debriefing session in simulation-based learning with high-fidelity manikin

**Scopes of Discussions**

1. The Role of Simulation for Health Professionals and Students in Attaining Emergency Skills and Teamwork.
2. Scenario Development in Simulation-Based Learning
3. Conducting an Emergency Simulation-Based Learning
4. Skills to Conduct Debriefing Session in Emergency Simulation-Based Learning

**Activities**

| Time | Session |
|---|---|
| 15 minutes | Introduction and Sharing of Participants on Challenges in Teaching Emergency Team |
| 15 minutes | The Role of Simulation for Health Professionals and Students in Attaining Emergency Skills and Teamwork |
| 20 minutes | Scenario Development in Simulation-Based Learning |
| 20 minutes | Conducting an Emergency Simulation-Based Learning |
| 20 minutes | Conducting Debriefing Session in Emergency Simulation-Based Learning |
| 15 minutes | Hands-On Practice 1 :<br>• Developing Scenario |
| 45 minutes | Hands-On Practice 2<br>• Simulation Demonstration<br>• Debriefing |
| 20 minutes | Discussion of the Debriefing Skills |
| 30 minutes | Reflection of Participants and Closing |

**Pre-Conference Workshop 5**

## Developing a Meaningful Portfolio in Postgraduate Medical Education

Friday, October 18th 2019, 13.00 – 16.00
Auditorium 1, 3rd Floor Education Tower, IMERI Building

**Speakers:**

1. Sandra Kemp
2. Aulia Rizka
3. Diantha Soemantri

**Curriculum Vitae**

**Professor Sandra Joy Kemp** is Director of Learning and Teaching at Curtin Medical School, Curtin University in Perth, Australia. She is an education scientist and completed her PhD in Educational Studies at the University of Sheffield, United Kingdom. Prior to joining Curtin Medical School in 2016, she was Assistant Dean at a new medical school in Singapore and she has held senior leadership positions in education in Australia and Singapore. She is a curriculum and assessment specialist with expertise in evaluation, pedagogy, educational technologies, and learning. She has worked extensively with medical and health professional educators in Australia, Singapore, the United Kingdom, Ireland and Sweden to implement quality assessment and curriculum practices.

**Aulia Rizka, MD, PhD** is an internist and geriatrician. She was graduated from Faculty of Medicine Universitas Airlangga and continued to Internal Medicine Residency Program and Geriatric Consultant Program in Faculty of Medicine Universitas Indonesia (FMUI). She was also graduated from Master of Medical Education and Doctoral Program from the same university. Now she works as Geriatric Consultant in Cipto Mangunkusumo National Hospital and lecturer in Faculty of Medicine Universitas Indonesia. She is also now Head of Education Commitee of the hospital. She is a member of Medical Education Unit of FMUI, which is responsible for specialist and consultant programs, and also an editor of Medical Journal of Indonesia (MJI). Her research interests are mainly about aging and medical education.

**Diantha Soemantri, MD, MMedEd, PhD** graduated as a medical doctor from Faculty of Medicine Universitas Indonesia in 2005, acquired MMedEd title from University of Dundee in 2007 and PhD in the same field from University of Melbourne in 2013. She is now the head of Master in Medical Education Program in Universitas Indonesia and also responsible for the multi- and interprofessional curriculum of Health Sciences Cluster. Since 2018, she is appointed as the vice director of medical education of the Indonesian Medical Education and Research Institute (IMERI). Her research interests are student assessment, reflection and feedback, interprofessional education and collaborative practice, and professionalism development.

**Background**

Designing portfolios for use in medical education is complex. Defining the scope of the portfolio, how the portfolio is integrated into the curriculum, and how it is used for formative/summative assessment are just some of the facets the need to be planned in the design stage. Key features of implementation and management of the portfolio, particularly with the advent of technology, also need to be planned in advance for meaningful portfolio use.

**Summary**

Designing portfolios for use in medical education is complex. This workshop focuses on the how programme directors and leaders can plan for key features of implementation and management of a portfolio, particularly with the advent of technology. By the end of the workshop, participants will understand the strategic design of a portfolio, be familiar with processes for integrating curriculum-assessment, and better understand how to plan for meaningful portfolio development.

**Objectives**

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

1. Discuss the strategic design of a portfolio
2. Create an integrative curriculum-assessment map of the portfolio
3. Understand the planning sequence & facets for meaningful portfolio development

**Scope of discussion**

1. Evidence base related to portfolios
2. Multiple purposes of portfolios
3. Curriculum/learning activity/assessment integration

**Activities**

| Time | Session |
|---|---|
| 15 mins | Introduction |
| 20 mins | Overview of portfolio in medical education |
| 25 mins | Group work: discussion on the potential use of portfolio in different courses |
| 45 mins | Group work: develop portfolio map |
| 15 mins | Break |
| 30 mins | Presentation of portfolio map |
| 30 mins | Group work: discussion on the strategies (including enablers and inhibitors) of portfolio development and implementation |
| 20 mins | Sharing group work results |
| 10 mins | Summary and closing |

**Reading materials**

1. Driessen, E. (2017). Do portfolios have a future? *Theory and Practice, 22*(1), 221-228. doi:10.1007/s10459-016-9679-4

**Pre-Conference Workshop 6**

## Revisiting PBL – How to Better Engage Your Students

Friday, October 18th 2019, 13.00 – 16.00
Auditorium 2, 3rd Floor Education Tower, IMERI Building

**Speakers:**

1. Albert Scherpbier
2. Estivana Felaza
3. Mardiastuti Wahid

**Curriculum Vitae**

**Professor Dr. A.J.J.A. 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 interests in medical education are quality assurance, professionalisation of medical education, career prospects for medical teachers, involvement of medical students in improving the quality of education, and medical education research. He has published extensively on medical education research. He published more then 300 papers in international peerreviewed 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 supervises national and international PhD students (more then 60 finished). He 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).

**Estivana Felaza** is a lecturer at department of medical education FMUI since 2007. She graduated from FMUI as a medical doctor in 2004, and finished her master degree in medical education in 2011. Her area of interests are in the field of teaching-learning, students support, and faculty development.

**Dr. dr. Mardiastuti H Wahid, SpMK(K)** is a senior lecturer in Faculty of Medicine Universitas Indonesia. Graduated as medical doctor in 1987, she

continued her master degree study in microbiology in Western Illinois University, the USA. She acquired postgraduate degree training in Clinical Microbiology in 2001 and consultant degree in Mycology in 2009 from FMUI. She has been an academic staff in Department of Microbiology FMUI since 1987. She was a member of Medical Education Unit FMUI since 2002-2016. Her interest in Medical Education brought her to pursue a doctorate degree in Medical Education in Faculty of Medicine, Universitas Gadjah Mada. She is currently a chairman of Clinical Microbiologist Specialist Postgraduate Training at FMUI and a research coordinator in Department of Medical Education FMUI. Her research interest in medical education includes curriculum development, problem-based learning, and faculty development.

**Background**

Problem-Based Learning was first introduced in medical education in the 1960s. During its 50-years journey, many institutions has adopted the approach and gained valuable lessons from its implementation. As students' characteristics and their involvement in group dynamics played important role in PBL process, changes occurring throughout the years made facilitating role more challenging. Practical tips are needed for tutor in order to effectively facilitate PBL and support students' learning.

**Summary**

One of the many challenges of Problem-Based Learning is ensuring effective group dynamics occurring during the session. Facilitators need to consider students' characteristics and situational factors to make sure suitable facilitating approach could be implemented. In this workshop, we would discuss the underlying principles of Problem-Based Learning from its early years of practice in medical education, get to know more about group dynamics and how it affects discussion, and practice the tips of facilitating PBL discussion

**Objectives**

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

1. Describe the development of PBL concept
2. Describe group dynamics and how it affects PBL process
3. Discuss the challenges faced in implementing PBL today
4. Discuss suitable facilitating tips needed according to the PBL situations

**Scope of Discussion**

1. How PBL concept was developed
2. Group dynamics
3. Challenges of implementing PBL today
4. Facilitating tips for effective PBL

**Activities (180 mins)**

| Time | Session |
|---|---|
| 10 mins | Ice breaking |
| 10 mins | Introduction to the workshop |
| 20 mins | How PBL was developed |
| 20 mins | Group discussion:<br>Group dynamics and how it affects PBL process |
| 20 mins | Challenges of implementing PBL today |
| 20 mins | Group discussion:<br>Challenges of implementing PBL today |
| 20 mins | Facilitating tips for effective PBL |
| 40 mins | Role play:<br>Selecting suitable strategies in facilitating according to the PBL situations |
| 20 mins | Reflections and take home messages |

**Pre-Conference Workshop 7**

## Teaching Medical Communication Skills for Next Generation

Friday, October 18th 2019, 13.00 – 16.00
Auditorium 3, 3rd Floor Education Tower, IMERI Building

**Speakers**

1. Endang Basuki
2. Wresti Indriatmi

**Curriculum Vitae**

**DR. Endang Basuki, MD, MPH** is a professor at Department of Community Medicine, Faculty of Medicine Universitas Indonesia. Graduated from Faculty of Medicine Universitas Indonesia in 1971, and received her MPH degree from University of California at Berkeley in 1980, majoring in Health Management. She got her Doctoral degree from Faculty of Public Health Universitas Indonesia in 2003, majoring in Health Communication. She went to Cambridge University to have a course on Doctor-Patient Communication. Nowadays she is a faculty member of Department of Medical Education Universitas Indonesia. She did a lot of projects in public health and communication supported by national and international agencies such as Kemenkes, BKKBN, USAID, URC, ADB, European Community, JICA, GTZ, JHU-PCS and others. She has published several journals both nationally and internationally in coordination with international researchers from several countries. She teaches provider-clients communication in several universities and hospitals in Indonesia, and also conducts workshops for doctors and other health providers, in health communication area.

**Wresti Indriatmi**, graduated as medical doctor from Faculty of Medicine Universitas Indonesia (FMUI) in 1983. She has been a specialist in Dermatology and Venereology since 1995 from FMUI, as a Consultant in 2001 from Indonesian College of Dematology and Venereology. She is also a Master in Clinical Epidemiology since 2001 from the Faculty of Community Health UI. She completed the Doctoral degree in 2011 from FMUI, with the dissertation about the "Teaching materials of sexual history taking for sexually transmitted infections' patient." Since 2011 she got the title of

FINSDV (Fellow of the Indonesian Society of Dermatology and Venereology) and also FAADV (Fellow of Asian Academy of Dermatology and Venereology). Currently, she worked in Department of Dermatology and Venereology as a lecturer for undergraduate and postgraduate, and as the Head of STI division, and also as the Head of medical communication division in the Department of Medical Education. She also worked as an editor for DV journal, national (MDVI) and international (JDVI). She published many books about STI, STI and HIV, also human papillomavirus infection as one of the editors and author. Her interests are in STI, medical communication, and also in biostatistics. She is the active member of Indonesian Society of Dermatology and Venereology; Indonesian Herpes Study Group; Advisory Board of Indonesian STI Study Group; International Union Against Sexually Transmitted Infections (IUSTI) – Asia Pacific; Indonesia HPV Working Group; European Association for Communication in Healthcare (EACH); and American STD Association (ASTDA).

**Background**

In the healthcare or clinical setting, effective communication is the cornerstone of high-quality care. Good communication skills are essential and an asset in medical practice. Better communication between doctor and patient builds confidence, improves compliance, and reduces mistakes and mishaps, thereby reducing malpractice suits. Patients are now seeing themselves as consumers of medicine rather than patients of medicine, and what this really means is that patients are starting to take a more active role, not only in what kind of treatment they get, but who they get it from.

Communication skills can be taught to medical students to increase clinical competence. Teaching communication skills in clinical practice requires trainers to believe in, demonstrate and teach them. Shortcomings in communication skills teaching may be perpetuated by the supervisor's belief that it is not essential to their expertise and cannot be taught. Communication skills can be taught at courses, are learnt, but are easily forgotten if not maintained by practice. Effective communication skills teaching requires clinical supervisors to know what is important to teach and to be able to recognize good or poor skill performance.

A new generation of physicians will practice according to the expectations and training they received in medical school. New communication technologies have permeated virtually every area of the healthcare delivery system in recent years, including provider–patient email exchanges,

electronic records, access to laboratory results via the Internet, text messaging reminders, and the use of handphone applications. The convergence of the Internet, wireless computer technology, global satellite positioning, and computer tailoring of messages are just a few examples of the high-tech revolution that has led to communication changes within the health delivery system.

Physicians often view the idea of interacting with patients via email or through other web-based means in a negative light. while email has the ability to increase doctor–patient communication, many physicians are reluctant to transcend traditional provider–patient relational boundaries because of such issues as patient privacy, the reduced ability to provide psychosocial dimensions of healthcare, and increased vulnerability to medical malpractice litigation. In addition, given the many demands on physicians' time in most healthcare organizations, responding to multiple web-based interactions with patients increases their workload and may be another reason why we have not seen substantial physician–patient interaction via the Internet.

The development of the Internet has created possibilities for increased patient–patient communication, mostly through web communities, social networking sites like Facebook, and specialized computer-mediated support groups. Problems communicating about health with traditional face-to-face support network members may lead some individuals to seek support on-line. Individuals use computer-mediated communication as a "functional alternative" when face-to-face communication is perceived as difficult or not preferred. For individuals facing illness whose support needs are not met by their traditional support network, the Internet allows them to find other people with similar health concerns and provides an opportunity to obtain support from a much larger network than would be possible in the face-to face world.

**Summary**

By attending this workshop, the participants will comprehend the strategies and skills on teaching doctor-patient communication, in responding the change of information technologies which could affect the type of communication between doctor and patient.

**Objectives**

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

1) Identify opportunities to teach the basic elements of communication
2) Describe what materials and methods needed to achieve doctor communication skills
3) Describe how the information technology has influence the doctor and patient communication
4) Recognize the effect of social-media on doctor-patient relationship

**Scope of Discussions**

1) The importance of effective interpersonal and communication skills in doctor-patient relationship
2) Scope of teaching materials about doctor-patient communication
3) Teaching methods of doctor-patient communication
4) Recognize the role of advancement in communication technology for the doctor-patient relationship

**Activities:** 210 minutes

| Time | Session | |
|---|---|---|
| 10 minutes | Ice breaking | WI |
| 10 minutes | Introduction to the workshop | EB |
| 30 minutes | **Lecture 1.** Doctor—patient communication: Why it is important, when and how to teach? | EB |
| 30 minutes | Group work 1 | EB & WI |
| 20 minutes | Discussion 1 | EB & WI |
| 30 minutes | **Lecture 2.** Medical communication in the era of social-media: how it affects the doctor-patient relationship. | WI |
| 30 minutes | Group work 2 | EB & WI |
| 40 minutes | Discussion 2 | EB & WI |
| 10 minutes | Concluding remarks | WI |

**Reading materials**


1) Kurtz S, et al. Teaching and Learning Communication skills In Medicine, 2nd Ed Radcliff Publishing Ltd, 2006
2) Wright KB, et al. Health communication in the 21st century. 2nd Ed. John Wiley & Sons, Inc 2013
3) Parvanta CF, Bass SB. Eds. Health Communication: Strategies and Skills for a New Era. Jones & Bartlett Learning, LLC, 2020
4) Marinescu V, Mitu B. The power of the media in health communication. Routledge, 2016

**Pre-Conference Workshop 8**

## How to Seek and Act on Feedback – Essential Skills for Medical and Health Professions Students

Friday, October 18th 2019, 13.00 – 16.00
Classroom 1, 7th Floor Education Tower, IMERI Building

**Speakers**

1. Natalia Widiasih
2. Dwita Oktaria
3. Anyta Pinasthika

**Curriculum Vitae**

**Natalia Widiasih Raharjanti, MD** is a dedicated forensic psychiatrist consultant with 7 years of work experience in mental health, social services and criminal justice fields. She was born in December 9th, 1973 and earned her medical degree from Universitas Indonesia (UI) in 1999. She graduated as psychiatrist in 2006 and Master of Medical Education in 2011 from UI. Natalia is currently the Head of Forensic Psychiatry Division (2008-present), Head of Psychiatric Residency Programme (2013-present) at Cipto Mangunkusumo General Hospital, Head of National Board Psychiatry Examination Committee (2014-present) and member of Medical Education Unit Faculty of Medicine UI. She had numerous researches with particular interest in medicolegal aspect of psychiatric cases, forensic report writing and understanding criminal minds. She also created several innovations on medical education system such as Validity and Reliability of Postgraduate Hospital Educational Environment Measure (PHEEM) – Bahasa Indonesia Version (2016) and Development of An Application-Based e-Portfolio to Enhance Quality of Supervision In Postgraduate Medical Education (2019).

**Dwita Oktaria** is a lecturer from Faculty of Medicine Universitas Lampung since 2010 until now. She got her medical degree in 2009 from Faculty of Medicine Universitas Lampung then continued her study in Master of Medical Education Faculty of Medicine Universitas Indonesia in 2013 until 2015. She interested in formative assessment, especially in feedback. Her thesis about undergraduate medical students' perspectives in feedback-

seeking behaviour already published in Malaysian Medical Journal of Science in 2018.

**Anyta Pinasthika** graduated as a medical doctor from Faculty of Medicine Universitas Indonesia (FMUI) in 2019, she is currently an intern in Department of Medical Education, Faculty of Medicine Universitas Indonesia. She has been interested in medical education throughout her days as a medical student, including her research about coping mechanism in undergraduate medical students, participating in the 9th JAKMED where she spoke about Formative Assessment in undergraduate medical students, and joining national medical student organizations in medical education.

**Background**

Feedback plays an important role in the learning process since it affects motivation and students' approaches towards the learning process. Feedback provides information about student performance, what their strengths are and weaknesses that still can be improved. If given effectively, feedback can promote learning. Receiving constructive feedback can raise learners' awareness of their strengths, shine attention on areas that need more attention and contribute to making an action plan to improve these. The literature has demonstrated that students are put in a passive position, although each individual may, either intentionally or unintentionally, look for strategies to gather information about him- or herself for self-evaluation.

**Summary**

The workshop will discuss the importance of feedback and how to actively seek feedback from the students' perspectives. The participants will be encouraged to share their experience and to practice in providing and responding feedback.

**Objectives**

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

1. Understand the importance of feedback
2. Demonstrate how to give a constructive feedback
3. Demonstrate how to seek and act toward a feedback

**Scope of Discussion**

1. Definition and attributes of constructive feedback
2. Factors that affect feedback-seeking behaviour
3. Stages when receiving feedback

**Activities**

| Time | Session |
|---|---|
| 30 minutes | Role play of giving, seeking and receiving feedback |
| 30 minutes | Sharing experience when giving, seeking and receiving feedback |
| 30 minutes | Definition and attributes of constructive feedback |
| 30 minutes | Factors that affect feedback-seeking behaviour |
| 30 minutes | Stages when receiving feedback |
| 30 minutes | What happens after the workshop |

**Reading materials**


1. Algiraigri AH. Ten tips for receiving feedback effectively in clinical practice. Med Educ Online. 2014; 19
2. Davies K, Guckian J. How to ask for and act on feedback: practical tips for medical students. MedEdPublish. 2018
3. Oktaria D, Soemantri D. Undergraduate medical students' perceptions on feedback-seeking behaviour. Malays J Med Sci. 2018;25(1):65–73

# MAIN CONFERENCE

19-20 October 2019

IMERI Building, Faculty of Medicine Universitas Indonesia, Jakarta

**Keynote Speech**

## The Academic Health Center: Core Challenges and Emerging Issues

Saturday, October 19th 2019, 08.30-09.00
Main Hall, 1st Floor, IMERI Building

**Speaker :**
Prof. Albert Scherpbier

**Curriculum Vitae**

**Professor Dr. A.J.J.A. 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 interests in medical education are quality assurance, professionalisation of medical education, career prospects for medical teachers, involvement of medical students in improving the quality of education, and medical education research. He has published extensively on medical education research. He published more then 300 papers in international peerreviewed 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 supervises national and international PhD students (more then 60 finished). He 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).

**Abstract**

## The Academic Health Center: Core Challenges and Emerging Issues

Academic health centers are more important today than ever before. Collectively, in the last decade alone, they have generated advances in biomedical science that have revealed more about the human body than has been learned in all of history theretofore. And that has enabled a broad range of healthcare professionals, educated at these distinguished institutions, to do more for patients today than ever before, in every area of healthcare. Progress has been nothing short of astounding and there never has been a better time to pursue a career in the health sciences or the health professions.

Of course, this remarkable progress comes with daunting challenges that, in turn, reveal new opportunities. This presentation will explore these challenges and opportunities, including specific examples from the leaders of academic health centers around the world. The presentation will conclude by discussing the need for academic health centers to act collectively and how they most effectively can be a venue for forward-thinking, progressive, and solution-focused ideas.

**Plenary 1**

## Faculty Development 4.0: Preparing Teachers in Medical and Health Professions Education of the Future

Saturday, October 19th 2019, 09.30-10.30
Main Hall, 1st Floor, IMERI Building

**Speaker:**
Dr. Dujeepa D. Samarasekera

**Moderator:** dr. Ardi Findyartini, PhD.

**Curriculum Vitae**

**Dr. Dujeepa D. Samarasekera** is the Director, Centre for Medical Education (CenMED), Yong Loo Lin School of Medicine and Senior Consultant at the Ministry of Health Singapore. He is a honorary Professor in Medical Education at Tzu Chi University Taiwan and Semey University Kazakhstan. He has been involved in curriculum development, quality assurance and accreditation and faculty development at both undergraduate and postgraduate level health professional courses. He is the Course Director of the Masters in Health Professions Education - Singapore and is the Chair Faculty Teaching Excellence Committee (FTEC) for Yong Loo Lin School of Medicine and Saw Swee Hock School of Public Health. In addition, he leads the School of Medicine Continuous Quality Improvement team at the deanery. He is the co-chair for faculty development in the residency programme and a member of the Undergraduate Curriculum Committee, Graduate Medical Education Committee, Faculty Assessment Committee and Curriculum Steering Committee at the School of Medicine and National University Health System. At MoH level, he is part of the Professional Training Assessments and Standards division. At the regional and international level, he is a member of the ASPIRE for Excellence panel at the European Association for Medical Education to evaluate medical schools that have achieved excellence in specific areas of faculty development, assessment etc. and Co-chair the Asia Pacific Scholar Network (APMENet) in medical education. He is the present President of the College of Clinician Educators at Academy of Medicine Singapore, President of the Western Pacific Association of Medical Education and an Executive Board Member of the World Federation of Medical Education. He serves on the

editorial advisory boards of Annals of Academic Medicine Singapore, South East Asian Journal of Medical Education, Korean Journal of Medical Education, Journal of Educational Evaluation for Health Professions, BLDE Medical Journal, AMEE online journal MedEdPublish and Perspectives in Medical Education. He serves in many international medical education organisations and has published widely in peer-reviewed medical education journals as well as authored book chapters relating to Medical and Health Professional Education. He holds the fellowships of the Academy of Medicine Singapore, Academy of Medicine Malaysia, Academy of Medical Educators in the United Kingdom, Royal College of Physicians Edinburgh and the fellowship of Medical Educators Europe.

**dr. Ardi Findyartini, PhD.** is currently the Head of Department of Medical Education, Faculty of Medicine, Universitas Indonesia. She graduated as medical doctor from FMUI in 2002 and completed her PhD in medical education from Melbourne Medical School, Faculty of Medicine Dentistry and Health Sciences, University of Melbourne in 2012. She is also the Head of Medical Education Unit of FMUI and the Head of Medical Education Center Cluster at IMERI, FMUI. She has been actively involved in the curriculum development of undergraduate and postgraduate medical programmes and in conducting faculty development programs in FMUI and at the national and international levels. She has been publishing scholarly works and contributing in the review process in national and international peer reviewed journals and conferences. Her research interest are in the curriculum development, interprofessional education and interprofessional collaborative practice, professional development, clinical reasoning, student's adaptation and transition and socio-cultural related issues in medical and health professions education.

**Abstract**

## Faculty Development 4.0: Preparing Teachers in Medical and Health Professions Education of the Future

*Dr. Dujeepa Samarasekera*

As medical and health professional schools are focusing on developing future ready healthcare professionals, it is critical to identify and cultivate leadership at all levels and across multiple roles in the training institutions. Relevant and structured Faculty Development programs are necessary to build the critical mass of informed biomedical and clinical educators to take leadership roles. The programs should support teachers with current and effective methods for providing the best instruction for students through their leadership in professional development, modeling instruction and coaching support for teachers. Furthermore, the programs must ensure that building capacity for effective engagement in a disruptive era should include working with multiple stakeholders such as the school leadership, resource providers and students to build a culture of trust and success.

**Meet the Expert 1**

## Portfolio Development for Learning Purpose

Saturday, October 19th 2019, 10.30-12.00
Auditorium 1, 3rd Floor Education Tower, IMERI Building

**Speaker :**
Prof. Sandra J. Kemp

**Curriculum Vitae**

**Professor Sandra Joy Kemp** is Director of Learning and Teaching at Curtin Medical School, Curtin University in Perth, Australia. She is an education scientist and completed her PhD in Educational Studies at the University of Sheffield, United Kingdom. Prior to joining Curtin Medical School in 2016, she was Assistant Dean at a new medical school in Singapore and she has held senior leadership positions in education in Australia and Singapore. She is a curriculum and assessment specialist with expertise in evaluation, pedagogy, educational technologies, and learning. She has worked extensively with medical and health professional educators in Australia, Singapore, the United Kingdom, Ireland and Sweden to implement quality assessment and curriculum practices.

**Abstract**


### Portfolio Development for Learning Purpose

*Prof. Sandra J. Kemp*

This session presents an opportunity to discuss and get advice on your own portfolio development and meet other colleagues working with portfolios. Please bring any questions/thoughts/plans you have about how to design and develop a portfolio for learning purposes, in your context. You are welcome to come with any portfolio ideas or issues you may have.

**Meet the Expert 2**

## Humanistic Learning Environment

Saturday, October 19th 2019, 10.30-12.00
Auditorium 2, 3rd Floor Education Tower, IMERI Building

**Speaker :**
Prof. Albert Scherpbier

**Curriculum Vitae**

**Professor Dr. A.J.J.A. 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 interests in medical education are quality assurance, professionalisation of medical education, career prospects for medical teachers, involvement of medical students in improving the quality of education, and medical education research. He has published extensively on medical education research. He published more then 300 papers in international peerreviewed 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 supervises national and international PhD students (more then 60 finished). He 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).

**Abstract**

## Humanistic Learning Environment

*Prof. Albert Scherpbier*

In order to incorporate humanistic values (altruism, integrity and self-awareness) in the learning environment we need 1) time in the program,2) role models and 3) awareness. Humanistic values can be an important part of learning in skills lab, during physical examination training and communication training or in the real world during contact with patients and or community. Working in small groups and discussing real cases is another way to learn the importance of humanistic values. Role models and awareness are important factors to consider. It is known from the area of communication training that students can learn things undergraduate, but if in the real world specialists say that they should for example not ask open questions, the learning effect will disappear fast. So if you plan to incorporate humanistic values, you have to pay attention to teachers and engage them an offer them training. The other issue is awareness. 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. This could be of help in training the teachers as mentioned earlier. 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.

**Meet the Expert 3**

## Curriculum Innovation in Disruptive Era

Saturday, October 19th 2019, 10.30-12.00
Auditorium 3, 3rd Floor Education Tower, IMERI Building

**Speaker :**
Dr. Dujeepa Samarasekera

**Curriculum Vitae**

**Dr. Dujeepa D. Samarasekera** is the Director, Centre for Medical Education (CenMED), Yong Loo Lin School of Medicine and Senior Consultant at the Ministry of Health Singapore. He is a honorary Professor in Medical Education at Tzu Chi University Taiwan and Semey University Kazakhstan. He has been involved in curriculum development, quality assurance and accreditation and faculty development at both undergraduate and postgraduate level health professional courses. He is the Course Director of the Masters in Health Professions Education - Singapore and is the Chair Faculty Teaching Excellence Committee (FTEC) for Yong Loo Lin School of Medicine and Saw Swee Hock School of Public Health. In addition, he leads the School of Medicine Continuous Quality Improvement team at the deanery. He is the co-chair for faculty development in the residency program and a member of the Undergraduate Curriculum Committee, Graduate Medical Education Committee, Faculty Assessment Committee and Curriculum Steering Committee at the School of Medicine and National University Health System. At MoH level, he is part of the Professional Training Assessments and Standards division. At the regional and international level, he is a member of the ASPIRE for Excellence panel at the European Association for Medical Education to evaluate medical schools that have achieved excellence in specific areas of faculty development, assessment etc. and Co-chair the Asia Pacific Scholar Network (APMENet) in medical education. He is the present President of the College of Clinician Educators at Academy of Medicine Singapore, President of the Western Pacific Association of Medical Education and an Executive Board Member of the World Federation of Medical Education. He serves on the editorial advisory boards of Annals of Academic Medicine Singapore, South East Asian Journal of Medical Education, Korean Journal of Medical Education, Journal of Educational Evaluation for Health Professions, BLDE

Medical Journal, AMEE online journal MedEdPublish and Perspectives in Medical Education. He serves in many international medical education organizations and has published widely in peer-reviewed medical education journals as well as authored book chapters relating to Medical and Health Professional Education. He holds the fellowships of the Academy of Medicine Singapore, Academy of Medicine Malaysia, Academy of Medical Educators in the United Kingdom, Royal College of Physicians Edinburgh and the fellowship of Medical Educators Europe.

**Abstract**

## Curriculum Innovation in Disruptive Era

*Dr. Dujeepa Samarasekera*

The clinical practice environment of health professionals and the characteristics of students entering medical schools are rapidly changing. Are our curricula capable of developing the skills necessary for the future and faculty ready to teach? To ensure future-readiness of instructional design and faculty's readiness for proactive engagement to develop relevant teaching-learning processes are critical elements for success. The presenter will share from his own experience at National University of Singapore, School of Medicine and his engagement with Medical Programs globally through his engagement with organizations such as the World Federation of Medical Education, Western Pacific Associations of Medical Education & AMEE to elicit relevant conversations with the participants.

**Symposium 1**

## Healthcare in Disruptive Era and the Implications in Medical and Health Professions Education

Saturday, October 19th 2019, 13.00-14.30
Main Hall, 1st Floor, IMERI Building

**Speakers:**

1. C. Donald Combs, PhD
2. Prof. dr. Ari Fahrial Syam, SpPD-KGEH, MMB, FINASIM, FACP, FACG
3. Prof. Albert Scherpbier

**Moderator:** Dr. dr. Dwiyana Ocviyanti, SpOG(K), MPH

**Curriculum Vitae**

**C. Donald Combs, Ph.D.** serves as Vice President and Dean, School of Health Professions, at the Eastern Virginia Medical School (EVMS). Dr. Combs holds faculty appointments as Professor of Health Professions at EVMS, Professor of General Medicine at the State Medical and Pharmaceutical University "Nicolae Testemitsanu", Visiting Professor of Medical Simulation at University of Paris—Descartes and as Adjunct Professor of Modeling, Simulation and Visualization Engineering at Old Dominion University. From 1996 to 2002, he served as a Senior Fellow at the U.S. Naval Postgraduate School. He has research interests in health and human services management, educational program development, health professions regulation, and medical modeling and simulation. He currently serves on regional, state, and national boards and task forces that address national and international issues, including the Board of the Society for Simulation in Healthcare. His current research focuses on the implications of sensors and artificial intelligence for medical and health professions education.

**Prof. dr. Ari Fahrial Syam, SpPD-KGEH, MMB, FINASIM, FACP, FACG** is a Professor of Internal Medicine Faculty of Medicine Universitas Indonesia. His research interest is gastroenterology, specifically *Helicobacter pylori (H. pylori*) infection. His Scopus H-Index by May 2019 is 10. One of his most impactful publication is Indonesian H. pylori Wide Study, one of very few *H. pylori* research conducted nationally which result is used as a benchmark

data for further *H. pylori* study in Indonesia. He is elected as the Dean of Faculty of Medicine Universitas Indonesia in 2017, leading a Faculty which consists of more than 4900 students. He has been successful in increasing FMUI's reputation through collaboration with International Faculties, increasing FMUI's International Publication, increasing the number of staffs with Ph.D degree, and sending crisis management team to Earthquake survivors in Palu, Donggala, and Sunda Strait. He is also the Regional Ambassador of for Association of Academic Health Centers International (AAHCI) Southeast Asia Regional Office and The Chairman of Asian Medical Dean Network. His passion as a clinician has led him to educate patients through many platforms, namely nationally televised Programs, radio, news, and blogs. He has also created a mobile application named "*apa kata dokter*" specifically to educate people concerning health issues.

**Professor Dr. A.J.J.A. 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 interests in medical education are quality assurance, professionalisation of medical education, career prospects for medical teachers, involvement of medical students in improving the quality of education, and medical education research. He has published extensively on medical education research. He published more then 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 supervises national and international PhD students (more then 60 finished). He 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. Dwiyana Ocviyanti, SpOG(K), MPH** is currently a vice dean of Faculty of Medicine Universitas Indonesia. She graduated as medical doctor from FMUI in 1986 and graduated as an Obstetricians and Gynaecologist from FMUI in 1995. She obtained her PhD program in the field of Clinical Epidemiology from Faculty of Public Health Universitas Indonesia in 2006.

She has worked as an educational staff in Department of Obstetrics and Gynaecology FMUI-RSCM since 1995. She was appointed as educational coordinator and head of educational program of Obstetricians and Gynecologist in FMUI-RSCM in 2009-2017. She has been appointed as Vice President of The Indonesian College of Obstetrics and Gynecologist since 2016, and as President of the Indonesian Society of Cervical Pathology and Colposcopy which is a member of The International Federation of Cervical Pathology and Colposcopy since 2013. She has been involved in researches with the main focus in cervical cancer prevention in low resource setting and research in gynecology infection.

## Abstract

### The Emerging Role of Artificial Intelligence in Healthcare

*C. Donald Combs, PhD*

The changing state of healthcare requires educational reforms that will enable effective entry into contemporary practice. Educational reform proposals abound. Common themes include renewed emphasis on communication, teamwork, risk-management and patient safety. These are important reforms, but they are insufficient. They do not adequately address the most fundamental change of all: *the practice of healthcare is rapidly transitioning from the information age to the age of artificial intelligence*. Employers need healthcare professionals who: work at the top of their licensure; have knowledge that spans the health professions and the care continuum; effectively leverage data platforms; and, focus on analyzing outcomes and improving performance. Future practice will have four characteristics that must be addressed in professional education. First, care will be provided anywhere. Second, care will be provided by healthcare teams. Third, care will be delivered based on a growing array of data from multiple sources and applications of artificial intelligence. Fourth, the interface between medicine and machines will need to be skillfully managed. Education for health students will need to evolve to include systematic curricular attention to the organization of professional effort among a variety of health professionals, the use of intelligence tools such as machine learning and robots, and a relentless focus on improving performance and patient outcomes.

## Healthcare in Disruptive Era and The Implications In Medical And Health Professions Education

*Prof. dr. Ari Fahrial Syam, SpPD-KGEH, MMB, FINASIM, FACP, FACG*

Technological advancement today is growing in an exponential rate. We live our daily life relying from the help of gadgets. In the medical field, this advancement of technology can be used to share research articles which will bring benefit to the society. In today's industrial revolution 4.0 there are three key points that have to be mastered, which are artificial intelligence (AI), big data, and internet of things. These key points will benefit medical and health professions education in ways we have never seen before. To enable the implementation of these advancements, interprofessional collaboration is utmost important. Using cutting-edge technology, distance learning through webinar is able to be done. Medical students and other health professions students can join education led by distinguished experts from around the world easily. Moreover, research collaborations are easier to be conducted.

## Healthcare in Disruptive Era and the Implications in Medical and Health Profession Education

*Prof. Albert Scherpbier*

Many things are changing in health care and the change is going fast. This means that we have to prepare our students on this reality. The undergraduate program is short, usually 4-6 years and the working life of a health professional is much longer, around 40 years. This means we have to think about learning activities over the whole period. In undergraduate education, students have to learn how to learn, because they need that later. They also have to learn to adapt at other circumstances, because the reality is changing so fast. Compared to old curricula there are two important changes needed. The cost of health care in many countries is almost unaffordable, so we need to learn more about prevention, to avoid that people become sick. The other important change is the developments in data sciences and information technology. That is going so fast, that students need to understand it. After undergraduate programs, we need training programs to keep the health professionals up to date. In many countries over the world health professionals need to follow courses to keep their certification. The only issue can be that they make the wrong choices;

people have the tendency to follow programs from which they know already something. Therefore, a program is better than only courses.

**Plenary 2**

## Assessing Future Medical and Health Professions

Sunday, October 20th 2019, 08.30-09.30
Main Hall, 1st Floor, IMERI Building

**Speaker :**
Prof. Sandra J. Kemp

**Moderator:** dr. Diantha Soemantri, MMedEd, PhD

**Curriculum Vitae**

**Professor Sandra Joy Kemp** is Director of Learning and Teaching at Curtin Medical School, Curtin University in Perth, Australia. She is an education scientist and completed her PhD in Educational Studies at the University of Sheffield, United Kingdom. Prior to joining Curtin Medical School in 2016, she was Assistant Dean at a new medical school in Singapore and she has held senior leadership positions in education in Australia and Singapore. She is a curriculum and assessment specialist with expertise in evaluation, pedagogy, educational technologies, and learning. She has worked extensively with medical and health professional educators in Australia, Singapore, the United Kingdom, Ireland and Sweden to implement quality assessment and curriculum practices.

**dr. Diantha Soemantri, MMedEd, PhD** graduated as a medical doctor from Faculty of Medicine Universitas Indonesia in 2005, acquired MMedEd title from University of Dundee in 2007 and PhD in the same field from University of Melbourne in 2013. She is now the head of Master in Medical Education Program in Universitas Indonesia and also responsible for the multi- and interprofessional curriculum of Health Sciences Cluster. Since 2018, she is appointed as the vice director of medical education of the Indonesian Medical Education and Research Institute (IMERI). Her research interests are student assessment, reflection and feedback, interprofessional education and collaborative practice, and professionalism development.

**Abstract**

## Assessing Future Medical and Health Professions

*Prof. Sandra J. Kemp*

This presentation explores contemporary thinking about assessment, how this connects with learning (for students/trainees and educators), and implications for assessing future medical and health professionals. The use of portfolios is presented as an illustrative case study for how assessment that is designed to enhance learning functions in specific ways. The role of the portfolio in fostering adaptive learning behaviours, the interaction with assessment of learning, and the role educators can play, will be considered.

Theoretical and empirical work related to 'assessment for learning', or formative assessment, has focussed attention on how students learn from feedback. The importance of the design of both feedback and assessment at system level has also gained prominence. The use of portfolios in medical and health professional education highlights how curriculum and assessment intersect in important ways. These areas have become critical for educators to understand and there are increasing imperatives for educators to develop associated assessment knowledge and skill sets.

The challenge for educators is to build repertoires of knowledge related to theoretical concepts, be familiar with the evidence base, and understand how these underpin assessment practice. The need for educators to learn from the practical knowledge of others, combined with the need to implement (and understand) technology is becoming increasingly critical for assessing future medical and health professionals.

**Panel Discussion 1**

## Preparing Teachers for Robot-Proof Medical and Health Professions Education in Indonesia

Sunday, October 20th 2019, 10.00-12.00
Main Hall, 1st Floor, IMERI Building

**Panelists:**

1. Prof. Dr. Pauline Pannen, MLS.
2. Dr. Anis Fuad, DEA
3. Prof. Dr. dr. Budi Wiweko, SpOG(K), MPH

**Moderator** **:** Dr. dr. Nani Cahyani Sudarsono, SpKO(K)

**Curriculum Vitae**

**Prof. Dr. Pauline Pannen, MLS** is an expert in higher education, e-learning, distance education, educational technology and curriculum development. She earned her Doctoral degree in Educational Technology from Syracuse University, USA. She has over 30 years of experience in national and international education, including her tenure as director of the Regional Open Learning Center of the Southeast Asia Ministers of Education Organization (SEAMEO SEAMOLEC), Vice Rector of Academics and Student Affairs at Universitas Siswa Bangsa International, Dean of Faculty of Education at Universitas Terbuka, chairman of several task forces on higher education quality development and improvement programs under the auspices of DGHE, including the development of the Indonesian MOOCs, writes in scholarly journals, and speaks at national and international education forums. Currently she is working as Senior Adviser on Academics to the Minister of Research, Technology and Higher Education.

**Dr. Anis Fuad, DEA** is researcher and academician with strong interest on e-health. He has been involved in various projects, research and consultancies related to health informatics development and evaluation in Indonesia. He understands very well the general architecture and challenges of the existing Indonesian health information infrastructure. He believes that appropriate adoption of e-health technologies (including but not limited to Electronic Medical Records, Health Information Exchange, telemedicine and telehealth and m-health) is very important to achieve affordable, equal and

quality health services in Indonesia. He also serves as working council member and among the founders of AeHIN (Asia eHealth Information Network), a peer to peer network of eHealth practitioners in Asia.

**Prof. Dr. dr. Budi Wiweko, SpOG(K), MPH** is a vice director of Indonesian Medical Education and Research Institute Faculty of Medicine Universitas Indonesia (IMERI FKUI) and also a General Secretary for Indonesian Society for Obstetrics and Gynecology (POGI). After graduated as a specialist in Obstetrics and Gynecology from Universitas Indonesia in 2005, he spent his time as a research fellow on ovarian tissue vitrification and in vitro culture of follicles at Hyogo College of Medicine Japan. He continued his research on basic laboratory on ART and had some clinical IVF training in Osaka, Barcelona, Thailand and Vietnam. He defensed his PhD thesis on "Pre-antral follicle vitrification" in Faculty of Medicine Universitas Indonesia in 2014. Then he continued study to received master degree in public health from University of Gadjah Mada – Yogyakarta, Indonesia.
He is a former research manager of FMUI (2014-2018) who contribute a lot for establishing research and innovation in FMUI as well as IMERI development.
He did also a lot of contribution in developing IVF field in Indonesia. He is also a coordinator of trainer for Subspecialty in Reproductive Endocrinology and Infertility Fellowship in FMUI.

He has received a lot of awards nationally and internationally, including Best Graduates Awards from FKUI 2005, Best Indonesian young obstetrics and gynecologist award 2005 (Tadjuludin Award), Asia Pacific Young Gynecologist Award 2006, Indonesian Best Paper Award 2009 (Sarwono Awards) Best researcher FKUI 2009, 2010, 2011, Asia Pacific Best Paper 2014, First Winner of Universitas Indonesia Best Lecturer 2015, First Winner of Indonesian Best Lecturer 2015, UI Innovation Award, Gynecologist innovation awards 2015 (Makelew Award), Indonesian Best Paper Awards 2009 (Sarwono Awards), Best Indonesian Innovator 2016 (First place and second place of Inovasi 108 - 2016)
He did and published a lot of researches in ART especially in AMH, individualized controlled ovarian stimulation (iCOS), ovarian tissue vitrification and embryo metabolomics. Up to now, he has published 72 original articles in international journal (indexed in pub- Med and Scopus).
Now he is The President of Indonesian Association for IVF (IA-IVF) for 2016-2020 as well as Indonesian Society for Obstetrics and Gynecology (POGI-

JAYA). He has just appointed as The President of Asia Pacific Inititative on Reproduction (ASPIRE) 2018 – 2020. He is also a member of advisory board of Merck Serono Asia Pacific and general secretary of Indonesian Society for Reproductive Endocrinology and Infertility (HIFERI). He is very active in a lot of regional organization such as Pacific Rim Fertility Society (PRFS), European Society for Human Reproduction and Embryology (ESHRE), International Federation of Fertility Society (IFFS), American Society for Reproductive Medicine (ASRM), International Society for Fertility Preservation (ISFP) and American Association for Gynecology Laparoscopy (AAGL). Now he is trying to develop ovarian tissue cryopreservation in Indonesia and establish Asian Society of Fertility Preservation (ASFP) as founding member.

**Dr. dr. Nani Cahyani Sudarsono, SpKO(K)** is a lecturer at the Faculty of Medicine, Universitas Indonesia (FMUI) since 1998. She graduated as Medical Doctor from FMUI in 1987. As an MD, she did the compulsory work for the government in Regional Hospital of Jayapura, at Jayapura, Papua (Irian Jaya back then) in 1988-1992. After finishing Sports Medicine training at FMUI, she started to teach in the Department of Physiology and Sports Medicine Program, both at the FMUI. She also works as consultant in the Exercise Clinic FMUI.

She started to involve in the undergraduate education as coordinator of Physiology subject in undergraduate medical education in 2003 - 2006. Later, she became the member of Medical Education Unit FMUI in 2005 – 2008 she coordinates the undergraduate program at FMUI. In Sports Medicine Program, she started as research coordinator at 2002 and became the Program Head in 2006 – 2009. In 2014-2018 she held the position as Manager of Education and Student Affairs. In 2018, she was appointed as the head of Academic Quality Assurance Unit FMUI.

**Abstract**

This panel discussion highlighted about the competences of future medical and health professions education teachers in disruptive era as well as the practical faculty development approach necessary to prepare medical teachers for robot-proof medical and health professions education.

**Student Symposium**

## Students' Innovation and Entrepreneurship to Adapt to Industrial Revolution 4.0

Sunday, October 20th 2019, 13.00-15.00
Main Hall, 1st Floor, IMERI Building

**Speakers:**

1. Dr. Dujeepa Samarasekera
2. dr. Dani M. Trianto
3. dr. M. Aji Muharom
4. dr. Siti Aisyah Ismail, MARS

**Moderators:**

1. Prof. dr. Anwar Jusuf, SpP(K)
2. dr. Anyta Pinasthika

**Curriculum Vitae**

**Dr. Dujeepa D. Samarasekera** is the Director, Centre for Medical Education (CenMED), Yong Loo Lin School of Medicine and Senior Consultant at the Ministry of Health Singapore. He is a honorary Professor in Medical Education at Tzu Chi University Taiwan and Semey University Kazakhstan. He has been involved in curriculum development, quality assurance and accreditation and faculty development at both undergraduate and postgraduate level health professional courses. He is the Course Director of the Masters in Health Professions Education - Singapore and is the Chair Faculty Teaching Excellence Committee (FTEC) for Yong Loo Lin School of Medicine and Saw Swee Hock School of Public Health. In addition, he leads the School of Medicine Continuous Quality Improvement team at the deanery. He is the co-chair for faculty development in the residency programme and a member of the Undergraduate Curriculum Committee, Graduate Medical Education Committee, Faculty Assessment Committee and Curriculum Steering Committee at the School of Medicine and National University Health System. At MoH level, he is part of the Professional Training Assessments and Standards division. At the regional and international level, he is a member of the ASPIRE for Excellence panel at the European Association for Medical Education to evaluate medical

schools that have achieved excellence in specific areas of faculty development, assessment etc. and Co-chair the Asia Pacific Scholar Network (APMENet) in medical education. He is the present President of the College of Clinician Educators at Academy of Medicine Singapore, President of the Western Pacific Association of Medical Education and an Executive Board Member of the World Federation of Medical Education. He serves on the editorial advisory boards of Annals of Academic Medicine Singapore, South East Asian Journal of Medical Education, Korean Journal of Medical Education, Journal of Educational Evaluation for Health Professions, BLDE Medical Journal, AMEE online journal MedEdPublish and Perspectives in Medical Education. He serves in many international medical education organizations and has published widely in peer-reviewed medical education journals as well as authored book chapters relating to Medical and Health Professional Education. He holds the fellowships of the Academy of Medicine Singapore, Academy of Medicine Malaysia, Academy of Medical Educators in the United Kingdom, Royal College of Physicians Edinburgh and the fellowship of Medical Educators Europe.

**dr. Dani Muhamad Trianto** is a former student activist graduated from Universitas Indonesia in 2019 with a cum laude title. He is currently the Co-founder/Chief of Business and Product Development of Healthpoint.id, a Kader (community health workers) empowerment startup for government and business research, while working as a corporate strategy intern directly below the CFO of Pt. Medikaloka Hermina Tbk. He leads the team of engineers for Healthpoint.id's development that resulted in several achievements such as becoming 1 of 3 Indonesian teams shortlisted for YCombinator USA video interview for summer 2019 worldwide startup incubation, 30 best startup of the NextDev Talent Scouting Telkomsel Jakarta 2019, 150 best startups of Thinkubator Grab, semifinalists of Plug and Play Indonesia Batch 4, and 1st winner of Startup Academy Compfest. He has secured Millions IDR for Healthpoint.id's initial funding and negotiated piloting & research partnership with stakeholders such as Mayor of Sukabumi and Universitas Indonesia.

**dr. M. Aji Muharom** is a fresh graduate medical doctor with keen interest in computer science, software engineering, innovation and entrepreneurship. He co-founded and is currently serving as Chief Technological Officer of Healthpoint, a tech startup that empowers Community Health Workers to help government and private businesses meet their community data and

research needs. He worked with a team of engineers to develop mobile application and web-based platform as Healthpoint's products. During medical school, apart from Healthpoint he has launched several tech-powered initiatives, such as community-empowerment program for dementia prevention coupled with a mobile application and electronic portfolio for medical trainees. He also helped initiate HITEC, health innovation, technology, and entrepreneurship community currently consisting of hundreds of medical students and doctors. He graduated from Universitas Indonesia with cum laude title.

**dr. Siti Aisyah Ismail, MARS** obtained her medical degree from Faculty of Medicine, University of Indonesia and her Masters degree in hospital administration from Faculty of Public Health, University of Indonesia. Her clinical experiences in both primary and secondary care while working in Malaysia, has tremendously gave her good insight in healthcare management, an area she is most passionate about. She is currently the Managing Director in Imani Primary Care, a company providing consultation and operatorship management for primary healthcare facilities. She is also active in health education for the public through IMANI-PROKAMI, where she has helped wrote many books on popular health.

**Prof. dr. Anwar Jusuf SpP(K)** is a professor in pulmonology. Currently, he is actively involved in the actively involved in the activities of Indonesian Doctor Council especially as medical education committee. Aside from his clinical and organizational activities, he is also a lecturer in Master Program in Medical Education FMUI since 2006. He conducts research and publishes articles in local and international journal.

**dr. Anyta Pinasthika** graduated as a medical doctor in 2019 from Faculty of Medicine Universitas Indonesia, she is currently an intern in Department of Medical Education, Faculty of Medicine Universitas Indonesia. She has been interested in medical education throughout her days as a medical student, including her research about coping mechanism in undergraduate medical students, participating in the 9th JAKMED where she spoke about Formative Assessment in undergraduate medical students, and joining national medical student organizations in medical education.

**Abstract**

## Students' Innovation and Entrepreneurship to Adapt to Industrial Revolution 4.0

*Opening Remarks by Dr. Dujeepa Samarasekera*

Curiosity is the key to learning. Curious students not only ask questions, but also actively seek out the answers and enjoy their learning. Curiosity also leads to critical thinking and innovation. The discussion will focus on how to develop these attributes as a student and use these to effectively engage in learning.

## Students' Innovation to Adapt to Industrial Revolution 4.0

*dr. Dani M. Trianto and dr. M. Aji Muharom*

Industrial revolution 4.0 enables disruptive innovation which introduces its own opportunities and challenges. Now consists of early "generation Z" and "millennials", medical students are also affected and are adapting to comply with these changes. As fresh graduate medical doctors, we reflect upon our journey during medical school: on how and why we, amidst intense medical training and abundant extracurricular activities, see intriguing problems in the world of healthcare and chose to build our own start-up. We share our experiences in being part of the early members and initiators of Health Innovation, Technology, and Entrepreneurship Community (HI-TEC), which now consists of hundreds of medical students and practitioners interested in "less-traveled road": innovation, technology, and entrepreneurship.

## Enterpreneurship Skills for Medical Graduates

*dr. Siti Aisyah Imani, MARS*

Entrepreneurship is not merely practical business, but rather a set of thinking skill which includes identifying problems, laying out options, problem solving, forecasting, managing risk, interpersonal relationship, building networks, seeing opportunities and many more. It is about applying corporate governance where credibility and SOP's are fulfilled. Apart from profit-seeking business, we also know social entrepreneurship in which the benefit (monetary or non-monetary) extends beyond designated

companies. Entrepreneurship is an essential skill that should be acquired by doctors. It can be useful later in their lives no matter what pathway they choose to develop their careers in. Early exposure on entrepreneurship can really give them a good insight in wider perspective.

# FREE PAPERS PRESENTATION

19 October 2019

IMERI Building, Faculty of Medicine Universitas Indonesia, Jakarta

# ORAL PRESENTATION

Schedules & Groups

**GROUP A**

Theme : Students Well-being

Rooms : Auditorium 1, 3rd Floor Education Tower, IMERI Building

**OA-02** **Pediatric Resident Burnout and the Learning Environment in Universitas Sebelas Maret Surakarta/Dr. Moewardi Hospital**
*Annang Giri Moelyo*

**OA-08** **Relationship of Medical Students' Year Level and Critical Thinking Score in Lambung Mangkurat University**
*Lena Rosida*

**OA-10** **Stress, Anxiety, and Depression amongst Undergraduate Medical Students of Faculty of Medicine Universitas Pembangunan Nasional Veteran Jakarta**
*Nurfitri Bustamam*

**OA-29** **Relationships between Learning Motivation and Learning Strategies and the National Competency Examination Results in Faculty of Medicine Universitas Methodsist Indonesia**
*Ivonne Ruth Situmeang*

**OA-37** **Effectiveness of Mindfulness Based Intervention (MBI) Technique in Reducing Stress Levels of Anesthesiology and Intensive Therapy Residents at the Faculty of Medicine Universitas Indonesia**
*Pradini*

**OA-55** **The Relationships of Self-Efficacy, Outcome Expectation, Career Intention, and Career Exploration in Nursing Students' Career Choice**
*Azzahra Shinta Intansari*

# ORAL PRESENTATION

Schedules & Groups

**GROUP B**

Theme : Assessment and Student Selection
Rooms : Auditorium 2, 3rd Floor Education Tower, IMERI Building

**OB-03** **Instrument to Assess Students Performance in Tutorial: Validity and Reliability**
*Rizka Putranti*

**OB-17** **Students' Perception of Structured Oral Examination in Faculty of Medicine Universitas Jenderal Soedirman**
*Miko Ferine*

**OB-20** **Workplace-Based Learning and Assessment Model to Improve Doctors' Competency in Patients Centered Comprehensive Care in the First-Level Healthcare Facilities: an action research**
*Farida Rusnianah*

**OB-22** **Evaluating Effectiveness of Assessment Model to Improve Patients Centered and comprehensive Care Competency for Doctors in the First-Level Healthcare Facilities**
*Trevino Pakasi*

**OB-28** **Admission policies and Methods at cross roads: A review of medical school admission policies and Methods in seven Asian countries**
*Diantha Soemantri*

**OB-30** **Internal Tryout as a Predictor National Exit Exam of Medical Students at Warmadewa University**
*Ni Wayan Diana Ekayani*

# ORAL PRESENTATION

Schedules & Groups

**GROUP C**

Theme : Teaching Learning and Faculty Development
Rooms : Auditorium 3, 3rd Floor Education Tower, IMERI Building

**OC-09** **Facebook Group Usability as Supporting Information Media to Enhance Cognitive Engagement in Ocular Trauma Flipped-Classroom**
*Muhammad Reza Utama*

**OC-39** **Acceptability of Medical Student in Second and Third Year Undergraduate Education toward Implementation of Online Learning Management System**
*Aria Kekalih*

**OC-41** **Reflection of Interactive Lecture in Medical Students: An Implication of Faculty Development**
*Laila Isrona*

**OC-48** **Learning Professionalism from Negative Role Model Medical Teacher: Is it useful?**
*Ita Armyanti*

**OC-53** **Multistage Advanced Airway Training in Residents: Gap Between Curriculum, Practice and Expectations**
*Faradila Triananda*

**OC-66** **Students' Participation in Online Student Evaluation of Teaching and Learning: An Analysis Based on Expectancy Theory of Motivation**
*Nourul Hidayah bt Mamat*

# ORAL PRESENTATION

Schedules & Groups

**GROUP D**

Theme : Interprofessional Education and Practice

Rooms : Classroom 1, 7th Floor Education Tower, IMERI Building

**OD-18** **Association between Self-Efficacy and the Readiness of Students in Universitas Baiturrahmah Conducting Interprofessional Education**
*Resti Rahmadika Akbar*

**OD-34** **Stereotypes of Health Professions in Indonesia: An Exploratory Study**
*I.G.A. Sri Darmayani*

**OD-43** **Third-Year Medical Students Interprofessional Education in Community Setting: What Did They Experience?**
*Siti Rokhmah Projosasmito*

**OD-62** **Modelling of Career Choice Behaviors in Indonesian Dentistry Students**
*Fianirazha Primesa Caesarani*

**OD-65** **The Impact of the Fourth Industrial Revolution and Its Implementation in Health Professional Education: An Integrative Review**
*Dani RIzali Firman*

# ORAL PRESENTATION

Schedules & Groups

**GROUP E**

Theme : Curriculum and Quality Assurance
Rooms : Classroom 3, 7th Floor Education Tower, IMERI Building

**OE-21** **Developing the Indicators of Comprehensive Patient-Centered Care for Postgraduate Education Purposes**
*Herqutanto*

**OE-25** **Students' Role in Quality Assurance of Health Professions Education: Their Understandings and Perspectives**
*Hui Meng Er*

**OE-31** **Male Circumcision with Guillotine Technique: A Literature Review**
*Michael Rulando*

**OE-36** **Fairclough's Three-Dimensional Critical Discourse Analysis for Literature Review in the Era of Abundant Information**
*Rachmad Sarwo Bekti*

**OE-46** **Learning Strategies and Prior Academic Achievement as Predictors of Academic Achievement in Faculty of Medicine Unisma**
*Marindra Firmansyah*

**OE-60** **Models of Palliative Care Education in Pediatric Resident's Curriculum: Systematic Review**
*Mikha Chandra Tampubolon*

## Oral Presentation Group A

OA-02

### Pediatric Resident Burnout and the Learning Environment in Universitas Sebelas Maret Surakarta/Dr. Moewardi Hospital

*Annang Giri Moelyo*

*Department of Pediatric, Faculty of Medicine, Universitas Sebelas Maret*

**Background**

The development of burnout during residency is considered related to the learning environment. The poor learning environment leads to the more symptoms of burnout, such as exhaustion and disengagement. Burnout made a negative impact on patient care (such as medical error) and also personal live of the residents.

**Aims**

To evaluate the correlation between learning environment and burnout in pediatric residency program in Universitas Sebelas Maret Surakarta/Dr. Moewardi Hospital.

**Methods**

A-Bahasa Indonesia-translation of Oldenburg Burnout Inventory (OLBI) and A-Bahasa Indonesia-translation of Postgraduate Hospital Educational Environment Measure (PHEEM) questionnaire was distributed to all pediatric residents in Universitas Sebelas Maret/Dr. Moewardi Hospital Surakarta in April-June 2019. The OLBI measured exhaustion and disengagement; while PHEEM measured autonomy, teaching and social support. The correlation between learning environment and burnout was analyzed by Spearman correlation.

**Results**

There were 45 subjects enrolled the study (response rate 79%). The cronbach-α was 0.86 (OLBI) and 0.95 (PHEEM). The PHEEM scores (overall, autonomy, teaching and social support) were 109.4±16.2; 38.4±6.2; 42.3±5.7; and 28.7±5.1, respectively. The proportion of exhausted and disengaged were 18/45 (40%) and 15/45 (33%). The correlation coefficient (r) between learning environment (overall, autonomy, teaching, social support) and exhaustion were (-0.41); (-0.52); (-0.38); and (-0.30) ($p<0.05$). The correlation coefficient (r) between learning environment (overall, autonomy, teaching, social support) and disengagement were (-0.44); (-0.45); (-0.48); and (-0.32) ($p<0.05$). Overall PHEEM score significantly had a negative correlation to exhaustion (r=-0.011) and disengagement (r=-0.013) ($p<0.05$). While adjusted to age, semester, and grade, exhaustion had a significantly correlation to perception of autonomy (r= -0.078) and social support (r= 0.057). Disengagement had significantly a negative corrrelation to only perception of autonomy (r= -0.051).

**Conclusion**

There were a significantly negative correlation between perceptions of learning environment and burnout in pediatric residents. The perception of autonomy had a negative correlation to exhaustion and disengagement.

## Oral Presentation Group A

OA-08

### Relationship of Medical Students' Year Level and Critical Thinking Score in Lambung Mangkurat University

*Pandji Winata Nurikhwan, Lena Rosida, Eka Yudha Rahman*

*Faculty of Medicine, Universitas Lambung Mangkurat*

**Background**
Critical thinking skills are considered as a skill that is essential and important for a doctor to have for taking clinical decisions. Thus, facilitating and supervising the development of critical thinking skills of a medical student is necessary.
**Aims**
This study aimed to compare the level of critical thinking with the education year level.
**Methods**
This study is a cross-sectional study. The population and sample in this study were students of the Medical Faculty of Lambung Mangkurat University. The sample was divided into first-year, second year, third-year, fourth-year preclinical, and clinical students. Data is obtained through a Diagnostic Thinking Inventory (DTI) questionnaire which measure flexibility of thinking (FoT) and structure of memory (SoM) domain. The paired T-test statistical test and ANOVA were conducted (alpha = 95%)
**Results**
The total of subjects was 654 students, 85 from clinical students, 147 from first-year students, 119 from second-year students, 143 from third-year students, and 160 from fourth-year students. There is a significant result on the SoM results' t-test academic phase compared to the clinical ($p = <0.0001$) but there are no significant results on the FoT results' t-test student academic phase compared to the clinical ($p => 0.05$). The ANOVA test found significant results in both domains. The highest SoM results were achieved by the student group clinical phase (mean 400.24) and the highest FoT results were achieved by third-year students in the academic phase (mean 364.53).
**Conclusion**
There are significant differences between the levels of students with diagnostic thinking inventory scores.

## Oral Presentation Group A

OA-10

### Stress, Anxiety, and Depression amongst Undergraduate Medical Students of Faculty of Medicine Universitas Pembangunan Nasional Veteran Jakarta

*Nurfitri Bustamam, Sri Wahyuningsih*

*Faculty of Medicine, Universitas Pembangunan Nasional Veteran, Jakarta*

**Background**
It is well known that the demands and pressure of medical school pose a tremendous challenge to personal wellness for students, leading to high rates of stress, anxiety, and depression.
**Aims**
This study aimed to determine the prevalence of stress, anxiety, and depression amongst undergraduate medical students of the Faculty of Medicine Universitas Pembangunan Nasional Veteran Jakarta (FM UPNVJ) and identify the associated factors with those psychological problems
**Methods**
This study used a cross-sectional design. First, second, and third years' medical students in the academic year 2018-2019 at FM UPNVJ were invited to participate in the study. The subjects were asked to fill out sociodemographic and mental health (DASS-42 - Depression, Anxiety, and Stress Scale) questionnaires. Chi-square was used to assess factor associated with DASS-42 scores
**Results**
Of the total 450 students enrolled at the medical school, 80% (n = 360) answered the questionnaire. The subjects were predominantly women (76.1%) with a mean age 19.2 (SD 1.04) years. Overall, the prevalence of stress, anxiety, and depression with various degrees was 47.8%, 69.4% and 36.9% among subjects respectively. Higher-level depression, anxiety, and stress were significantly associated with women, younger age, and first-years students. The higher-level of depression was also associated with incomplete learning facilities, having no best friend, and a little number of siblings. Stress was also associated with siblings' number and entry qualification to FM UPNVJ
**Conclusion**
This study revealed high levels of stress, anxiety, and depression in medical students. These findings suggest that the medical school should offer early detection, prevention, and intervention program for stress, anxiety, and depression amongst medical students.

## Oral Presentation Group A

**OA-29**

### Relationships between Learning Motivation and Learning Strategies and the National Competency Examination Results in Faculty of Medicine Universitas Methodsist Indonesia

*Ivonne Ruth Situmeang[1], Estivana Felaza[2], Mardiastuti H. Wahid[2]*

*[1]Department of Public Health, Faculty of Medicine, Universitas Methodist Indonesia*
*[2]Department of Medical Education, Faculty of Medicine, Universitas Indonesia*

**Background**
The curriculum of medical education in Indonesia is developed based on the competencies that expected to be achieved by graduates. To assess the achievement of the competencies is by conducting the National Competency Examination (UKMPPD). National Competency Examination is mandatory to obtain a license for practicing as a physician. Unfortunately, the result is unsatisfied. The success of examination might be influenced by learning motivation and learning strategies, which can be measured by Motivated Strategies of Learning Questionnaire (MSLQ).

**Aims**
To determine the relationship between learning motivation and learning strategy with the success of UKMPPD at Faculty of Medicine, Universitas Methodist Indonesia.

**Methods**
An analytical research with cross sectional design was performed. Respondents were all students who took the UKMPPD on November 2018, total sample was 148. The sample selection was done by non-probability sampling with a total sampling technique. Data analysis was conducted using Spearman test.

**Results**
The majority of the respondents were < 25 years old (54.1%), 59.5% is female and the successful rate of the UKMPPD was 20.94%. The lowest motivation variable was the anxiety component (median = 3). For the learning strategy variables, component was mostly scored 5 and 6. The highest correlation between motivation variable and UKMPPD was control of learning belief (r=0.232). Furthermore, the highest correlation of learning strategy variables and UKMPPD was peer learning (r= 0.378). Students' learning motivation and learning strategy were quite good. However, the relation between learning motivation and learning strategy toward the UKMPPD was weak-moderate. Multivariate analysis using path analysis showed that the highest motivation variable was control of learning belief (14,774). The highest learning strategy variable was the elaboration (15.234). Motivation influences learning strategy; learning strategy influences the UKMPPD. Further research is needed to explore other factors influence the test results

**Conclusion**
Learning motivation and learning strategies show weak-moderate correlation toward learning outcomes

## Oral Presentation Group A

OA-37

### Effectiveness of Mindfulness Based Intervention (MBI) Technique in Reducing Stress Levels of Anesthesiology and Intensive Therapy Residents at the Faculty of Medicine Universitas Indonesia

*Andi Ade Wijaya, Amir Sjarifuddin Madjid, Pradini*

*Department of Anesthesiology and Intensive Therapy, Faculty of Medicine, Universitas Indonesia*

**Background**

Anesthesiologist is a profession with high incidence of burnout. Burnout arises as a result of perceived stress that continues to occur without being overcome. Most anesthesiologists have felt stress since their specialist education. The development of programs aimed at reducing stress at the individual level since the period of specialist education can reduce the possibility of burnout forming in the future. One of the stress management program that is easy, simple, and can be done daily is Mindfulness Based Intervention (MBI).

**Aims**

This research was conducted to determine the effectiveness of MBI technique in reducing the stress level of anesthesiology and intensive therapy residents at the Faculty of Medicine, University of Indonesia.

**Methods**

This research was an experimental study with paired one group design. The research subjects were anesthesiology and intensive therapy residents at the Faculty of Medicine, University of Indonesia in 2019. The MBI training program lasted for four weeks, consisting of one formal face-to-face training at the beginning of the first week and informal training through homework carried out every day for four weeks. Data collection on the Perceived Stress Scale (PSS-10) was carried out on 12 study subjects, before and after the intervention in August 2019.

**Results**

The average age of study subjects (n = 12) was 29.75 years; 75% are women. 4 participants were in the debriefing education phase (33%), 3 people were in the internship education phase (25%) and 5 people were in the independent education phase (42%). Perceived Stress Scale (PSS-10) score in the study subjects significantly decreased after applying Mindfulness Based Intervention (MBI) technique for 4 weeks (p = 0.004).

**Conclusion**

Mindfulness Based Intervention (MBI) is effective to reduce stress levels in residents of anesthesiology and intensive therapy at the Faculty of Medicine, University of Indonesia.

## Oral Presentation Group A

OA-55

### The Relationships of Self-Efficacy, Outcome Expectation, Career Intention, and Career Exploration in Nursing Students' Career Choice

*Fianirazha Primesa Pratiwi, Monica Trifitriana, Azzahra Shinta Intansari*

*Undergraduate Program, Faculty of Medicine, Universitas Sriwijaya*

**Background**
Along with population growth every year there is an increase in the need for health workers, one of them is nursing staff. Nursing students in Indonesia still choose the profession of clinical nursing as the final choice of the nursing school they run. Career selection can be influenced by various factors, namely the exposure of students to the nursing profession or other factors such as self-efficacy, outcome expectation, career intention, and career exploration to the students themselves.
**Aims**
This study aims to determine relationship of self-efficacy, outcome expectation, career intention and career exploration in the choice of career for nursing study students in Indonesia with 1000 samples of nursing students
**Methods**
This research is an observational analytic study of 1000 samples of undergraduate and profession students of Nurse who have filled out an online questionnaire from March to June 2019. An online questionnaire consisting of a Career Decision Making Self-Efficacy-Short Form (CDMSE-SF), Career Decision Outcome Expectation (CDMOE), Career Exploration Planning or Intention Questionnaire (CEPI), Career Exploration Survey-Revised (CES-R), which has translated and validated. All models are analyzed using the maximum possible estimation of the AMOS application.
**Results**
This research showed that there was a significant relationship with marital status and family income.
**Conclusions**
The results of this study indicate that self-efficacy, outcome expectation and career intention influence career exploration significantly both directly and indirectly in the career choice of nursing students.

## Oral Presentation Group B

OB-03

### Instrument to Assess Students Performance in Tutorial: Validity and Reliability

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**Background**
Tutorial has become an ultimate implementation of problem based learning in medical education all around Indonesia. Assessment towards students performance during tutorial discussion is needed and recommended as it can give feedback both for students and faculty. Medical Faculty of Muhammadiyah Prof. Dr. Hamka University (UHAMKA) developed an instrument to assess students tutorial performance trough cognitive, psychomotor and affective.

**Aims**
This study aimed to know validity and reliability of tutorial assessment instrument in medical faculty of UHAMKA

**Methods**
Data was collected during the first semester at medical Faculty of UHAMKA, that consists of four blocks, with each block has students' scores of tutorial that most of it was given by two faculty members, and scores of Multiple Choice Question (MCQ) test. At the end of semester, students were given a Student Oral Case Analysis (SOCA) test and the scores were also collected. To examine the concurrent validity, we do T-test between tutorial and MCQ scores. For another perspective, we also do T-test between tutorial and SOCA scores. Kappa Cohen analysis towards tutorial scores were done to examine inter-rater reliability.

**Results**
Significant differences were found between tutorial score and MCQ on concurrent validity. However, we find there were no significant differences between tutorial score and SOCA. Kappa Cohen analysis shows variable results of six items: fair agreement for item 3 and 4, and moderate agreement for item 1,2,5, and 6.

**Conclusion**
Students tutorial assessment instrument in medical faculty of Uhamka has an acceptable concurrent validity and inter-rater reliability for a low stakes assessment, tough revision and improvement is suggested.

## Oral Presentation Group B

OB-17

### Students' Perception of Structured Oral Examination in Faculty of Medicine Universitas Jenderal Soedirman

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**Background**
Oral exams are considered to have many weaknesses, including low reliability, less standardization and higher possibility of students' factors could influence their performance. However, oral exams have crucial advantages such as improving verbal skills, creating possibility of giving feedback and reducing the chance of cheating. Faculty of medicine Universitas Jenderal Soedirman has develop structured oral examination (SOE) as one of final exams in the curricula.

**Aims**
The purpose of this study was to describe students' perceptions about structured oral exam on their experiences.

**Methods**
A qualitative study was performed with in-depth interviews. Subjects in this study were undergraduate students in Faculty of medicine Universitas Jenderal Soedirman who varied in gender and academic achievement.

**Results**
The results showed students had good comprehension about SOE. They considered SOE as the most difficult and worrying exam. They should study harder in preparing their performance than other exams. Examiner subjectivity was still becoming a problem for the students. Some students experience anxiety, insecurity and distrust of their knowledge could affect the result of SOE. However they knew that they could pass the exam when they had well preparation. **Conclusion**
SOE is considered as worrying and less standardization exam. However it has good impact in students' learning.

## Oral Presentation Group B

OB-20

### Workplace-Based Learning and Assessment Model to Improve Doctors' Competency in Patients Centered Comprehensive Care in the First-Level Healthcare Facilities: an action research

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**Background**
Doctors as gatekeepers at the first level healthcare facility should have a patient-centered comprehensive care competency. The competency is necessary to determine the optimization of referral program in the implementation of the National Health Insurance. Thus, learning methods with real situations in the workplace and standardized assessment are also required.
**Aims**
The study aimed to develop an education model to achieve the respective competencies.
**Methods**
The study design was an "Action Research" that divided into 4 stages: 1) diagnosing action, 2) planning action using Delphi method, 3) implementation 4) evaluation..
**Results**
A survey involving 96 patients, 56 doctors, and 64 lecturers determined the patient-centered and comprehensive care indicators. A questionnaire with 33 indicators were developed and assessed the relevant to evaluate patient-centered comprehensive care. The planning action developed the Workplace-Based Learning and assessment Model validated with expert judgment. The third stage was acting as the test model with a quasi-experimental design, consisting of 13 doctors in the intervention group and 12 doctors as a control group. The last stage was evaluating action measures with Kirkpatrick method which was purposed to prove the effectiveness of the model. Case-based Discussion which its consistency had been tested, functioned as instruments of Balint Group meeting modification. Following the implementation, we observed a significant difference of mean compared to the control group for the score of knowledge and skills.
**Conclusion**
The workplace-based learning and assessment was proven to be effective to increase knowledge and skill of comprehensive patient centered care among primary care doctors.

## Oral Presentation Group B

OB-22

### Evaluating Effectiveness of Assessment Model to Improve Patients Centered and comprehensive Care Competency for Doctors in the First-Level Healthcare Facilities

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**Background**
Doctors as gatekeepers at the first level healthcare facility (FLHF) need the patient centered comprehensive care competency. The competency is necessary to determine the optimization of referral program in the National Health Insurance System implementation. Currently, Indonesia is on the progress to establish postgraduate education for primary care physician or family medicine practice. The patient centered comprehensive care is one of the principles in primary care that views a patient as a whole-person, bio-psycho-social aspects, and for the purpose a curriculum has been developed as well as its evaluation tool.

**Aims**
The aim of the study, to evaluate whether the assessment tools are effective to measure improvements of a patient centered and comprehensive care.

**Methods**
The study is a quasi-experimental design with a control group. The intervention is the curriculum that has been developed for the purpose to improve competency in patient centered comprehensive care. Along with the curriculum development, a tool to assess trainees doctors' competencies were established. The assessment tool has been validated as reported in the other study report. To analyze we use SEM-PLS test to evaluate its effectiveness.

**Results**
Thirteen respondents from two groups were enrolled. The study observed 13 doctors as an intervention. The quasi-experimental method was determined with the consideration that the roles of education experimental study.
Case-based Discussion and Direct Observation as Instruments of assessment models which its consistency had been tested functioned as instruments. The SEM-PLS test showed Assessment Model was effective in improving patient-centered and comprehensive care competency for Doctors in FLHF.

**Conclusion**
The study proved the use of case-base discussion and direct observation will improve the effectiveness to educate trainees to improve their competencies in patient centered comprehensive care.

## Oral Presentation Group B

OB-28

### Admission policies and Methods at cross roads: A review of medical school admission policies and Methods in seven Asian countries

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**Background**
Medical student admission plays an important part in selecting the right applicants. One universally accepted selection criteria is the academic capacity. However, there are other universal criteria such as communication skills and local criteria (e.g. socio-cultural values of a country, human resource needs) that are no less important.

**Aims**
This article is aimed to review the policies and methods of selection to medical schools in seven countries with varying socio-economic conditions and healthcare systems.

**Methods**
Senior academics involved in medical education in Indonesia, Japan, Malaysia, Philippines, Singapore, Sri Lanka and Taiwan completed a pre-agreed pro-forma which included both the admission policies and methods and a brief description about the country's socio-economic, health systems and demographic details. These details were then compared and contrasted.

**Results**
This review identified that there is tension between many of these policies and methods, such as between the need to assess non-cognitive abilities and widening access; and between the need for more medical professionals and the requirement to set the highest entry standard possible.

**Conclusion**
Finding the right balance requires careful consideration of all variables including the country's human resource needs, socioeconomic status, graduates expected competencies; and the school's vision and mission and availability of resources.

## Oral Presentation Group B

OB-30

### Internal Tryout as a Predictor National Exit Exam of Medical Students at Warmadewa University

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**Background**
Medical graduates are expected to meet establish competency standards in order to carry out health services properly. In Indonesia, the national exit exam called Uji Kompetensi Mahasiswa Program Profesi Dokter (UKMPPD) is implemented to improve the quality of graduates. This exam is the final evaluation that must be followed by students who have passed clinical clerkship. UKMPPD consist of computer-based test (CBT) and objective structured clinical examination (OSCE).

**Aims**
This study aims to describe relationship internal tryout with the national exit exam of medical students at Warmadewa University.

**Methods**
The participants of this study were medical student in year 2013 who have passed clinical clerkship (N:79). CBT and OSCE item package created based on the national blueprint and reviewed by institutional reviewers. Internal tryout of CBT was held 4 times with different CBT item package and OSCE was held once time.

**Results**
This study showed that there was a positive correlation of all internal tryout and the national exit exam CBT result (0.671, 0.866, 0.791 and 0.706; $p<0.05$). The positive correlation also showed internal tryout OSCE ($r:0.457$; $p<0.05$). Internal tryouts of CBT have strong and very strong correlation with the national exit exam. Internal tryout of OSCE has a moderate correlation with national exit exam.

**Conclusion**
This study showed that internal tryout can be used as a predictor tool of national exit exam.

## Oral Presentation Group C

OC-09

### Facebook Group Usability as Supporting Information Media to Enhance Cognitive Engagement in Ocular Trauma Flipped-Classroom

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**Background**
Facebook has proven empirically to support the learning process of medical students. However, its potentials in supporting flipped-classroom method as a learning resources media still need further evaluation.
**Aims**
To measure undergraduate medical students' cognitive engagement changes in motivation, self-directed learning readiness, and knowledge gain after joining an ocular trauma flipped-classroom Facebook group.
**Methods**
A single group pretest-posttest study to measure three cognitive engagement variables changes had been done in the Faculty of Medicine, Muhammadiyah University Surabaya. A total of 45 third-year undergraduate medical students participated in this study. The pretest-posttest study was followed by observational study through Facebook Insight to see user activities that could possibly support cognitive engagement variables' changes.
**Results**
All variables of students' (n = 45) cognitive engagement after joining Facebook group were rising significantly (motivation, p = 0,000; self-directed learning readiness, p = 0,000; knowledge gain, p = 0,000). Self-efficacy and self-management of the users were found to be the most improved components of motivation and self-directed learning readiness.
**Conclusion**
Facebook group has the potential to improve students' cognitive engagement towards flipped classroom.

## Oral Presentation Group C

OC-39

### Acceptability of Medical Student in Second and Third Year Undergraduate Education toward Implementation of Online Learning Management System

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**Background**
Undergraduate medical students may face technical adaptation from paper-based in the previous high-school education to (partially) paperless learning environment in the university. In the first year, they were prepared to adjust to Universitas Indonesia online learning management system, called SCeLE (Student-Centered e-learning Environment). Afterward, they were expected to achieve maturity for an online learning system at the second- and third year of medical education

**Aims**
The study assessed the acceptability of undergraduate medical students in utilizing e-learning activities provided in SCeLE, e.g. availability of education material, interactive activity, and evaluation process

**Methods**
The study involved 2574 inputs from 237 medical students that experienced e-learning in 12 modules: every six modules in the second- and third-year of education. The inputs were from Likert scale and open-ended questionnaires provided online in SCeLE at the end of each module.

**Results**
More than 90% of medical students approved the easiness of SCeLE accessibility and the helpfulness of presentation materials, the pre- and post-test feature, supervisor-guided discussions, and platform for formative and summative evaluation. However, up to 19% of students still reluctant to use SCeLE for practical or skill evaluation. There were no significant differences of perception score between second- and third-year education, between regular and international class, and among modules ($p>0.05$). Students demanded more interactive materials like tutorial videos and interactive tests along with feedbacks.

**Conclusion**
Medical students, even in their second year of education, already had the decent acceptance toward online learning system. However, due to students' reluctance to practice session evaluation using online learning, lectures' extra creativity and efforts are required to design a more acceptable approach.

## Oral Presentation Group C

OC-41

### Reflection of Interactive Lecture In Medical Students: An Implication of Faculty Development

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**Background**
Faculty development is a progressively more essential aspect of medical education, especially in teaching. Faculty of Medicine-University of Andalas (FMUA) provides regularly trainings for teachers. One of them is workshop for lecture in Problem-Based Learning (PBL) curriculum.

**Aims**
The objective of this study was to evaluate the interactive lecture based on students' perception and self-reflection of the lecturer who participated in the workshop.

**Methods**
This was a mixed method study to evaluate two trial one hundred minutes' interactive lectures. The first one was interactive lecture on the 71 orientation clerkships students. The latter was activity on one hundred twenty the 3rd semester students. At the end of course, the students' responses were assessed quantitatively by using validated questionnaire. The open-ended questions as well as the understanding of materials was assessing qualitatively. Meanwhile, the teacher answered reflective questions and to be analyzed.

**Results**
The mean result for clerkship students was higher than the 3rd semester students'(35.00±1.82 vs 32.98±3.15). Predictably, both groups agreed with the new method of lecture. Open-ended questions contain students' suggestion and planning after took a part in the lectures. Mostly, they suggested the teaching method to be applied in other lectures and allocating more time in discussion. They understood the topic and able to imply the learning objectives. The lecturer reflected satisfied with the teaching process and perceived the workshop was very useful. Then, the weakness of the lecture has been highlighted to be changed.

**Conclusion**
Finally, an interactive lecture is an alternative to provide an effective course. The lecturer needs continuing training to improve their teaching and students' learning outcome.

## Oral Presentation Group C

OC-48

### Learning Professionalism from Negative Role Model Medical Teacher: Is it useful?

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**Background**
Through role modelling, teaching-learning process of professional development facilitated transfer knowledge, skill, and attitude that generate medical professionalism in medical students. Medical teacher could become a positive and negative role model, but frequently tend to negative rather than positive ones.
**Aims**
The aim of this study was to define the learning process that hidden in negative role modelling medical teacher, especially in teaching-learning medical professionalism.
**Methods**
The case study design used in this qualitative research. The samples were chosen using purposive sampling consist of medical students, medical teachers, alumnae, and institution. Focus group discussion, in-depth interview, and non-participant observation done to collect the primary data. The learning process of negative role modelling defined by thematic analysis.
**Results**
Four FGDs, fourteen in-depth interviews, and six non-participant observations were done in this study. The cognitive apprenticeship, negativity bias and Hofstede theory can be considered as the underlying theory in negative role modelling (NRM) learning process. Two schemes of the NRM learning process found in this study, which are the self-learning and the articulating process. The medical students are able to identify the faculty that considered as negative role model. Learning experience from negative ones will be easier to memorize and has positive affect for the students whom is capable to decide that they would not follow. This process required that the students realize that those experience are a negative learning point. Students' motivation also determines the learning outcome of NRM process, in line with basic role model theory: motivation theory. The faculty need to be active accompanied the process by the explanation and self-reflection.
**Conclusion**
Negative role modelling process having positive effect in professional development. The self-learning and the articulating process necessitated the faculty and students to be actively take roles in these two processes. It can be used in medical professionalism building, as long as students have great motivation to become a professional doctor.

## Oral Presentation Group C

OC-53

### Multistage Advanced Airway Training in Residents: Gap Between Curriculum, Practice and Expectations

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**Background**
Airway management is an essential part of anesthesiology training. However, formal airway rotation is not part of Indonesia's national anesthesiology curriculum. The curriculum governs a minimum requirement of 10 difficult airway managements, irrespective of airway devices. Our university-based teaching hospital trains airway management to anesthesiology residents in a multistage manner throughout residency program.

**Aims**
This paper aims to evaluate the gap between curriculum, practice and residents's expectations in multistage airway training.

**Methods**
In the initial stage, residents receive basic airway management training to mannequin, followed with practice in patients. In the second stage, residents learn to use more advance airway devices on mannequin in difficult airway workshops. In the final stage, residents participate in difficult airway simulation as we called "Monthly Airway Day" in the operating theatre, where they use advance airway devices in normal patients. After obtaining Research and Ethics Committee approval from our institution, an online survey was carried out to 106 residents of all years in a university-based teaching hospital in Indonesia.

**Results**
As residency progresses, there is an increase in types and frequency of airway devices used. By the end of residency, all residents have performed more than 50 supraglottic airway insertions and more than 50 direct laryngoscopies in patients. To compare, 68% of respondents thought that 0-20x supervised supraglottic airway insertions are needed to achieve competence. Meanwhile, 65% of respondents thought that 0-20x supervised direct laryngoscopies are needed to achieve competence. Seventy-three percent of residents have performed videolaryngoscopies in difficult airway patients for more than 20x, while 68% though that 0-20x supervised videolaryngoscopies are needed to be competent. Even though that 91% of residents have performed flexible fiberoptic intubation in difficult airway patients at some point, only 10% have done more flexible fiberoptic intubation for more than 10x. Fifty-five percent of residents thought that 0-10x flexible fiberoptic intubations are needed to be competent.

**Conclusion**
To conclude, multistage airway training in our university hospital helps promote the standard competence set for the national curriculum requirement of difficult airway.

## Oral Presentation Group C

OC-66

### Students' Participation in Online Student Evaluation of Teaching and Learning: An Analysis Based on Expectancy Theory of Motivation

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**Background**
Student Evaluation of Teaching and Learning (SETL)is a mechanism to gather and collate feedback to improve and enhance students' learning experiences. Online evaluation is widely adopted as it provides benefits such as providing immediate feedback, convenient to be administered through online platforms, readily digital data that can be used for analysis. Despite the accessibility and convenience of online evaluation, students' participations remain a concern, taken into account the worrying level response rates obtained, leading to the challenge of the achieving sufficient level of participation, affecting the accuracy of data as lower number of participations leads to greater margin of error of the results.

**Aims**
An analysis based on Expectancy Theory of Motivation which consists of three main elements namely expectancy (effort), instrumentality (performance) and valence (rewards) was done to comprehend the motivation of students' participation.

**Methods**
The analysis was based on the themes gathered from data of focus group and individual interviews. A total of 27 students were semi-structuredly interviewed. The data were thematically analyzed based on Braun and Clarke's (2019) Six Phase Framework for Thematic Analysis.

**Results**
The emergence of a total six themes corresponded to each element of Expectancy Theory of Motivation. The expectancy element was reflected through two themes; attitudes towards SETL and incentive of participation in SETL. The instrumentality element was depicted in three themes; technicalities of SETL, actions based on feedback from SETL and anonymity/confidentiality of feedback from SETL. Consequently, one theme was established within the valence element; importance of SETL.

**Conclusion**
The understanding of motivational elements of students' participation is enhanced and reduce the assumptions made on the factors leading to lack of participation in SETL. The analysis helps in improving the evaluation process flow and designing strategies to improve students' participation.

## Oral Presentation Group D

OD-18

### Association between Self-Efficacy and the Readiness of Students in Universitas Baiturrahmah Conducting Interprofessional Education

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**Background**

High quality health services can be obtained from good collaboration between health professional providers such as doctors, dentists and community health providers in good team collaboration. One of efforts to create effective collaboration between health professional providers needs early collaboration practice through the learning process using the Interprofessional Education (IPE) strategy. A student's readiness for a new method is influenced by many things including self-efficacy. Self-efficacy develops in individuals through observations of the consequences of their actions.

**Aims**

The purpose of this study is to determine the association between self-efficacy and the readiness of students in Universitas Baiturrahmah conducting Interprofessional Education (IPE)

**Methods**

This research uses descriptive correlation design with cross sectional approach. The sampling technique used consecutive sampling. The sample in this study were 264 students. The questionnaire in this study consisted of 2 types, namely the self-efficacy questionnaire consisting 27 statements and the IPE readiness questionnaire of 18 statements. The collected data was analyzed using the Spearman test.

**Results**

The results of this study indicated that the majority of students have moderate self-efficacy with a percentage (93.6%). The readiness of IPE in students is high with the percentage (58.3%) of 154 students, and there are no students in the category of low IPE readiness. From the results of the Spearman test showed that the value of p = 0.05.

**Conclusion**

Based on these results, it can be concluded that "There is an association between self-efficacy and readiness of Interprofessional Education (IPE) in students of the Baiturrahmah University Professional Program", where the higher the level of self-efficacy of students, the higher the readiness of student IPE. Therefore, to implement Interprofessional Education (IPE) in the Professional Program at Baiturrahmah University, it is necessary to make an effort to improve student self-efficacy to improve IPE readiness.

## Oral Presentation Group D

OD-34

### Stereotypes of Health Professions in Indonesia: An Exploratory Study

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**Background**
Effective and efficient health services require efforts to increase collaboration between health professionals. One of the barrier of effective collaboration is stereotypes. Stereotypes represent perceptions or perspectives about a person or group of people.
**Aims**
This study aims to explore perceptions of health professional students and practitioners regarding stereotypes.
**Methods**
This study was a qualitative study with phenomenology approach. Samples were selected using maximum variety sampling method, involving students from both academic and clinical stages as well as health practitioners. Primary data collection was conducted through focus group discussion. Data obtained were analyzed using thematic analysis. Nine focus group discussions were conducted.
**Results**
Four themes were identified from this study including types of stereotypes, factors affecting stereotypes formation, implications of stereotypes, and how to overcome stereotypes. Stereotype formation was affected by the lack of understanding of other health professions' role, hierarchical culture, personal experience in receiving healthcare, and community view. Stereotypes among health professionals caused obstacles in healthcare team communication and reduced self-confidence in certain health professionals. These stereotypes may be overcome through competency development and knowledge sharing among professionals as well as introduction of other health care professionals' roles and competences so that each profession possessed similar goals for patients' safety.
**Conclusion**
Both positive and negative stereotypes affected collaboration negatively. Stereotypes were greatly affected by multifactorial. Therefore, understanding of other professions' role is important, as well as interprofessional education (IPE) and collaborative practice (IPCP) to overcome the stereotypes formation.

## Oral Presentation Group D

OD-43

### Third-Year Medical Students Interprofessional Education in Community Setting: What Did They Experience?

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**Background**
Learning by experiencing in a real situation is believed to be more powerful rather than using simulation. This hypothesis is also applied to interprofessional learning for students in health profession education. Learning to collaborate and practicing students' knowledge of health care in a community become the purpose of the community and family health care (CFHC) program in Faculty of Medicine, Public Health and Nursing (FMHPN) Universitas Gadjah Mada (UGM). CFHC team create a particular design for third year students, focus on community health problems rather than a family health problem.
**Aims**
To portray interprofessional education in community setting program result for third-year UGM medical students.
**Methods**
Third year students are sent to the assigned community comprises of 10 houses or families for each interprofessional group. The groups consist of 5 students from three different health professions, medicine, nursing, and nutrition. Each group facilitates by a faculty from the institution and a health practitioner from the community primary health care facility. The group conducted a focus group discussion (FGD) to explore health issues and to decide together with the community the main problem that would be given intervention. Subsequently, the groups discussed with the facilitators to design simple intervention. After that, students visited the community and conducted a simple intervention. The group documented the entire process through a written report, video, and an article about their intervention outcome.
**Results**
The report, video, and article showed that students were able to demonstrate interprofessional practice in solving health problem in the community. They learned to work as an interprofessional team while experiencing it.
**Conclusion**
In order to help students to grasp the meaning of interprofessional practice, health profession education institutions supposed to provide a learning opportunity that closed to the real situation, one of them is by sending the students in an interprofessional group to the community to solve health issues collaboratively.

## Oral Presentation Group D

OD-62

### Modelling of Career Choice Behaviors in Indonesian Dentistry Students

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**Background**

The increasing number of dentists shows that this profession is one of the most popular career choices in Indonesia. The type of dentist professional development varies so that career planning is an important thing that has a big influence on one's future. The social-cognitive career theory (SCCT) perspective explains that there is a relationship between career self-efficacy, career outcome expectation, career intention and career exploration in the career selection process.

**Aims**

By using SCCT, this study aimed to determine the career exploration-related behavior relationship, which consists of career self-efficacy, career outcome expectations, career intention and career exploration, in the career determination for dentistry students in Indonesia.

**Methods**

This research is an observational analytic study of 505 samples of undergraduate and profession students of dentistry who have filled out an online questionnaire from March to June 2019. An online questionnaire consisting of a Career Decision Making Self-Efficacy-Short Form (CDMSE-SF), Career Decision Outcome Expectation (CDMOE), Career Exploration Planning or Intention Questionnaire (CEPI), Career Exploration Survey-Revised (CES-R), which has translated and validated. All models are analyzed using the maximum possible estimation of the AMOS application

**Results**

This research showed that there was a significant relationship between having a career plan and father's job.

**Conclusion**

This study concluded that self-efficacy, outcome expectation, and career intention influence the career exploration of dentistry students significantly both directly and indirectly.

## Oral Presentation Group D

OD-65

# The Impact of the Fourth Industrial Revolution and Its Implementation in Health Professional Education: An Integrative Review

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**Background**
One of the main characteristics of the fourth industrial revolution is digital technology, which cause disruptions. Health professional education as among other area, already begin exploring the opportunities and challenges, and even some of the educational provider or institution has started its implementation. The technological implementation of the fourth industrial revolution that suspected to be disruptive such as big data, data science, learning analytics, machine learning and artificial intelligence. In recent years, researchers in health professional education have shown an increased interest in that area based on the number of the papers that being published. There is an urgency to review the previous studies, in order to get the best evidence about its progress as future opportunities references.

**Aims**
This study aims to review the current technological applications of the fourth industrial revolution as well of the challenges of implementing it in health professional education.

**Methods**
This study will be conducted as an integrative review. Proquest, Pubmed, and Science Direct will be used as databases with keywords (“health professional education" OR "medical education" OR "dental education" OR "health education" OR "nursing education" OR "pharmacy education”) AND (“big data"OR "machine learning" OR "data science" OR "learning analytics" OR” assessment analytics" OR "artificial intelligence" OR "industrial revolution”). Prism analysis will discard any duplication finding and proceed by using the inclusion and exclusion criteria to narrowed down the results. Thematic analysis will be used on finding the themes within search results. Data will be subsequently pooled together and analyzed quantitatively.

**Results**
The n-result from a total of 68 articles that retrieved from databases will be analysed accordingly as describe on the method section.

**Conclusion**
There was significant increase implementation of big data, machine learning and learning analytics in health professional education. This integrative study will be beneficial on contributing the evidence-based for health professional education provider or institution on anticipating, preparing or even implementing the disruptive technologies as the fourth industrial revolution characteristic.

## Oral Presentation Group E

OE-21

### Developing the Indicators of Comprehensive Patient-Centered Care for Postgraduate Education Purposes

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**Background**
Indonesia is on the progress to establish a postgraduate education for primary care physicians in which requires comprehensive patient-centered care as a competency that should be achieved.
**Aims**
This study aimed to establish a questionnaire to measure the desired competency.
**Methods**
The questionnaire development started with reviewing literatures, continued to group discussions confirming the indicators. General practitioners, medical teachers, and patients later gave feedback from their perspectives about the indicators.
**Results**
Following the literature review, 33 indicators were selected to indicate a comprehensive patient-centered care. These were reviewed from several literatures in many curriculum of postgraduate study in family medicine and general practice. Content of the comprehensive patient-centered care included: respect to patient's value, expectation and needs, coordination of services, communication and education, comfort, emotional support to reduce anxiety, involving family and friends, continuity of care. The comprehensive care includes all preventive levels, i.e. provide emergency service, immunization, family planning, and mental health. Patients, practitioners, and teachers in faculty of medicine using a Delphi technique chose the items in the questionnaire and agreed to describe the comprehensive patient-centered care. The questionnaire was then validated among 33 respondents who were physicians.
**Conclusion**
There were 33 items that were validated and selected to describe a comprehensive patient-centered care that agreed by general practitioners and their patients, and medical teachers.

## Oral Presentation Group E

OE-25

### Students' Role in Quality Assurance of Health Professions Education: Their Understandings and Perspectives

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**Background**
Student engagement in quality assurance (QA) and enhancement is gaining momentum, extending from student evaluation of course and learning environment, to involvement in structures and process at subject, faculty and institutional levels. Direct student participation in quality processes have been suggested to effect an institutional-level cultural change that encourages shared responsibilities among faculty and students for students' learning, and ensures the students' voice is heard. It is also aligned with the movement in education to shift the role of students from "student as consumer" (SaC) to "students as partners" (SaP), to encourage active and deep learning. Research on "Students as Partners" have demonstrated enhanced motivation and learning, development of metacognitive awareness and sense of identity, improvement in teaching and classroom experience hence promoting a learning community, enhanced employability skills and graduate attributes, and improved citizens.

**Aims**
To explore the students' perception of their roles in QA of health professions education (HPE).

**Methods**
Semi-structured interviews were conducted among undergraduate medical, dentistry and pharmacy students to explore their views about student involvement in health professions program accreditation. The interviews were audio recorded and transcribed verbatim, following which a thematic analysis approach was used to identify the benefits, challenges and enablers for student participation in QA of HPE programs.

**Results**
The perceived benefits were aligned with the work competence, organizational acumen, personal characteristics and social intelligence domains of graduate work readiness. The challenges included time constraint, cultural barrier and lack of incentive. The enablers suggested were student readiness, understanding of the significance of QA, optimized feedback, formal roles in university governance and program audit, as well as incentives.

**Conclusion**
Students' learning experience can be optimized through greater roles in QA of HPE. This can be supported by the university governance and appropriate rewards and recognition system.

## Oral Presentation Group E

OE-31

### Male Circumcision with Guillotine Technique: A Literature Review

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*Haji Adam Malik General Hospital, Medan*

**Background**
Male circumcision is the most common surgical procedure on males, either due to cultural and religious issues, or health reasons. Although commonly performed, the risk of complication somehow still high especially related to the guillotine technique. Guillotine technique could result in amputation of the glans penis.

**Aims**
To review of the literature related to the male circumcision with guillotine technique, operator of the circumcision, and reconsider the competence of the health care provider.

**Methods**
In this literature review, database from PubMed and ScienceDirect are used to find relevant articles.

**Results**
Several studies have reported the glans amputation as the complication of circumcision. A total of 16 patients have been reported and all but four cases were done using guillotine technique. Most of the cases (10 patients) were circumcized by the paramedics. As young as newborn, and up to 12-year-old children could suffer this complication during circumcision. Most of the complications were caused by medically unqualified staff. However, in Indonesia we could not completely ban paramedics, considering in many remote areas, only paramedics are available. Based on these findings, we would like to ask the medical educator to reconsider the competence of paramedics in terms of circumcision, especially using guillotine technique. Recommendations could also be given to paramedic personnel to do dorsum circumcision instead, which gives safe results with minimal side effects in comparison to guillotine technique.

**Conclusion**
Circumcision is one of the most performed surgery; however, a careful selection of the technique should be made. Guillotine technique related to high complication rate, so we strongly suggest avoiding using this technique in daily practice. From our findings, paramedics often performed circumcision using guillotine technique, so their competence in circumcision should be reevaluated.

## Oral Presentation Group E

OE-36

### Fairclough's Three-Dimensional Critical Discourse Analysis for Literature Review in the Era of Abundant Information

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**Background**
Discourse analysis (DA) is an emergent method of analysis in health-related studies. Originated from linguistic and scripture studies, DA has helped researchers in the various discipline to understand texts as the representation of language in human life (semiotic). In the era of big text data and social media scrutiny, DA offers a versatile method to instill critical information. Unfortunately, the use of DA in health professional education (HPE) studies is still limited.

**Aims**
This study was intended to review how DA is utilized in HPE research, including the genre of methods dominantly used and how the genre influenced and being influenced by the research outcome. We expected that reviewing the use of DA could provide practical suggestions on how to perform the DA in further health professional education research.

**Methods**
We performed a unique literature review adapted from Fairclough's Three-Dimensional critical discourse analysis. In performing the review, we divided the steps into three phases. First, we developed the unit of analyses called corpora from collections of research papers published in targeted health professional education journals. Second, we performed text analysis following Fairclough framework of manifest-intertextuality. Third, by treating DA as a social practice, we explored how DA played its role (shaped or being shaped) in the health professional education community.

**Results**
We covered 369 research papers claimed to use DA in their methodologies. The papers are mostly qualitative research with some feature of descriptive quantitative visualization of the text analyses. Four genres of DA were found and Critical Discourse Analysis (CDA) was the most frequent genre used. The Foucaldian critical discourse analysis is one sub-genre of the CDA that has been dominantly promoted. Despite its versatility as an analysis framework and a mean to promote marginalized idea and ideology, DA has also been used as a promising method for conducting a literature review.

**Conclusion**
The 3-Dimensional Critical Discourse Analysis used in this study is suggested as an applicable alternative method to perform a critical literature review. By taking benefit from the analytics services provided by journal or database providers, this method warrants the researcher to instill critical information in the era of abundant digital data resources.

## Oral Presentation Group E

OE-46

### Learning Strategies and Prior Academic Achievement as Predictors of Academic Achievement in Faculty of Medicine Unisma

*Marindra Firmansyah, Devi Aulia*

*Department of Medical Education, Faculty of Medicine Universitas Islam Malang*

**Background**
Students' personal predictors of academic achievement are particularly relevant for medical college students, given the specific challenges that these students face when entering higher education (HE) especially in Medical Faculty. Academic Performance in HE has been related to multiple factors, including the students' approaches to learning (SAL) and prior academic achievement. Recent research has revealed that learning behavior is associated with academic achievement at the college level, but the impact of specific learning strategies on academic success as well as prior academic achievement differences there in are still not clear.

**Aims**
This study analyzes the combined effect of these predictors on perceived academic performance.

**Methods**
This study applying descriptive analytic cross sectional approach used all of the population 2016, 2017, 2018 batch year Faculty of Medicine Universitas Islam Malang's students. The learning strategy measured by Revised Study Process Questionnaire 2 Factors (R-SPQ-2F). The prior academic achievement was asked from result admission test. The academic performance was asked from Grade Point Average (GPA). Data analysis used pearson correlation test and logistic regression.

**Results**
The results from 196 students that collected using R-SPQ-2F and from secondary academic data show that the highest number of distribution learning approach and academic performance is deep approach and average academic performance (52,7%) and has significant correlation (r=0,272). The highest number of distribution prior academic achievement and academic performance is average on both variable (22,0%) in batch 2017 and has significant correlation (r=0,225). The most influencing toward academic performance is deep approach (t=4,357) and the other one is prior academic achievement (t=3,784).

**Conclusion**
Learning strategy and prior academic achievement to academic performance has significant correlation ($p<0,05$) with r value=0,272 (learning approach) and 0,225(academic admission test). And the most predictor of the academic performance is learning strategy.

## Oral Presentation Group E

OE-60

### Models of Palliative Care Education in Pediatric Resident's Curriculum: Systematic Review

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**Background**
Pediatric residents are expected to be competent in palliative care or end-of-life due to their frequent exposures to pediatric patients in critical care, terminal stage, palliative care, end-of-life, and hospices. However, there were only few schools and hospitals that have developed and implemented the palliative care education in pediatric resident's curriculum.

**Aims**
We tried to review and analyze the models of palliative care educations during pediatric residency program from all over the world.

**Methods**
Major medical database PubMed was systematically searched for observational studies evaluating the implementation of palliative care education in pediatric resident's curriculum, published until September 2019 with predefined protocol. The education term in the systematic searching included training, workshop, course, distance learning, and curriculum. The selected studies were then assessed with GRADE approach.

**Results**
One hundred twenty-three studies were found and screened based on their titles and abstracts. There were 58 studies included in our analysis, which all of them suggested the importance of implementing palliative care education during pediatric resident education. Besides teaching competencies in palliative care/end-of-life/hospices, some studies that evaluated communication and counseling course, interprofessional, cross-cultural, simulation-based training, and didactic education showed significant improvement among pediatric residents in managing the patients and their families. Moreover, incorporating family members of patients as co-learners or teachers in learning process also was valuable in implementation of palliative care education. Pocket reference card and pain card can be helpful as a tool to bridge the communication between the residents and pediatric patients.

**Conclusion**
Pediatric residents had varied prior exposures to in end-of-life or palliative patients. Therefore, the implementation of palliative care education in pediatric residency program is urgently needed. The palliative care curriculum incorporated with several competencies such as communication, counseling, interprofessional, cross-cultural skills can be helpful for residents to be more confident in providing palliative care.

# POSTER PRESENTATION

Schedules & Groups

**GROUP 1**

Theme : Students, Teachers, and Practitioners Well-being and Competences
Rooms : IMERI FMUI Building, 1st floor, Exhibition Area

**P1-04** **The Relationship between Entry Motivation and Students GPA in Faculty of Medicine Universitas Muhammadiyah Semarang**
*Mega Pandu Arfiyanti*

**P1-06** **Relationship between Coping Mechanisms and Adaptation Strategies with Culture Shock in Students from Outside Java Island in Faculty of Medicine Universitas Indonesia Academic Year 2015 to 2019**
*Sitti Robbyah Nauli Mansur*

**P1-19** **Developing Profile of Graduate Medical Education: Perception of Core Competences from Students, Lecturer, and Alumni of Faculty of Medicine Universitas Padjadjaran**
*Yuni Pratiwi*

**P1-26** **Terminology Skill in Midwifery Parasitology Subject First Year Student Year 2018 Universitas Brawijaya: Need More Practicing to Memorizing**
*Yulia Dwi Setia*

**P1-33** **Comparison of the Attributes of Ideal Medical Teachers between Preclinical Stage and Clinical Stage According to Medical Students' View in Faculty of Medicine Universitas Indonesia**
*Aldeka Kamilia Mulfidah*

**P1-44** **Validity and Reliability of the Indonesian Version of Teacher Stress Inventory (TSI)**
*Herqutanto*

**P1-45** **Global Prevalence of Burnout in Orthopaedic Surgeons: A Systematic Review**
*Pandji Winata Nurikhwan*

**P1-51** **Stressor Domain of the First Year Medical Students in Faculty of Medicine Universitas Pelita Harapan Based on the Results of Medical Student Stressor Questionnaire (MSSQ)**
*Mona Marlina*

**P1-54** **Developing Leadership Competence and Curricula in Medical Education**
*Syarifah Nora Andriaty*

**P1-57** **Relationship between Career Self Efficacy, Career Outcome Expectation, Career Intention, and Career Exploration in Career Selection of Nutrition Science Students**
*Monica Trifitriana*

**P1-68** **Teaching Religion and Spirituality for First Year Medical Students in FMUI**
*Oktavinda Safitry*

# POSTER PRESENTATION

Schedules & Groups

**GROUP 2**

Theme : Teaching Learning and Technology-Enhanced Learning
Rooms : IMERI FMUI Building, 1st floor, Exhibition Area

**P2-01** **The Effect of Microskill Supervisory Model to Improve Supervision Quality among Nursing Students**
*Reqgi First Trasia*

**P2-16** **Methods of Teaching and Learning for Opthalmologists and Residents in Ophthalmology Department Universitas Udayana**
*Made Paramita Wijayanti*

**P2-24** **The New Clinical Skills Learning Process for Medical Students**
*Fuad Khadafianto*

**P2-40** **e-Learning Readiness for Undergraduate Medical Students in the Health Care System Module in Faculty of Medicine**
*Ferdi Afian*

**P2-42** **The Role of Crisis Resource Management Training with High-Fidelity Manikin in Team Anticipation and Task Completion in Timely Manner**
*Edwin Deges*

**P2-47** **The effect of PBL Approach on Learning Interest of UMI Medical Students**
*Arni Isnaini*

**P2-49** **Experience Based Learning (ExBL) in Pre-Internship Module Faculty of Medicine Universitas Indonesia**
*Retno Asti Werdhani*

**P2-58** **Role Play as Practical Bioethics and Medicolegal Learning in FMUI**
*Agus Purwadianto*

**P2-61** **Adaptation of Medical Professionals in the Future Era of Medicine 4.0**
*Bernadine Gracia Dwirahajeng*

**P2-63** **Correlation of Conceptual Map Score with Knowledge Retention and Reasoning of Medical Students**
*Ristarin Paskarina Zaluchu*

**P2-67** **Medical Student Preferences of Learning Activities at the Faculty of Medicine Universitas Udayana 2019**

*I Made Sutha Saskara*

# POSTER PRESENTATION

Schedules & Groups

**GROUP 3**

Theme : Assessment, Learning Environment, and Reflections
Rooms : IMERI FMUI Building, 1st floor, Exhibition Area

**P3-11** **Level of Self-Reflection in the Learning of Medical Students Universitas Malahayati Batch 2015 in 2019**
*Fathidhiya Ramadhan*

**P3-12** **Students' Perception as an Institutional Challenge: Dynamics of Students' Perception toward Learning Environment at Syiah Kuala University Faculty of Medicine**
*Dedy Syahrizal*

**P3-13** **Student Perception of Using Logbooks as Learning Media for Prescription Writing in Block 3.4**
*Diani Puspa Wijaya*

**P3-14** **Internal Formative Assessment as Predictor for National Examination Computer-Based Score**
*Yuni Pratiwi*

**P3-15** **Comparing the results of OSCE in blocks based on the CSL delivering Methods (main and review CSL)**
*Nesyana Nurmadilla*

**P3-27** **Examining the Use of Two Instruments to Assess Reflective Writing in Undergraduate Professionalism Course**
*Nadia Greviana*

**P3-32** **Relationship between e-Professionalism Knowledge on the Utilizaiton of Social Media by Regular Students of FMUI batch 2014**
*Anindhita Soekowati*

**P3-35** **Analysis of Readiness of Medical Profession Students for Computer-Based Competency Test Online at Sam Ratulangi University**
*Anggun Rizty Proklamasia*

**P3-38** **Graduation Constraints of Retaker Students of Medical Profession Study Program at Faculty of Medicine Sam Ratulangi University**
*Herlina Wungouw*

**P3-50** **The Effect of Self-Reflection on Student Learning in the Basic Disease Mechanism Block**
*Ade Kiki Riezky*

**P3-52** **Students' Perception of Script Concordance Test in Assessing Diagnosis and Therapeutic Ability at Clinical Rotation of Pediatric Faculty of Medicine**
*Yeny Dyah Cahyaningrum*

**P3-59** **Learning in the Laboratory: How Medical Students Appraise the Educational Environment**
*Nurfachanty Fattah*

## Poster Presentation Group 1

P1-04

### The Relationship between Entry Motivation and Students GPA in Faculty of Medicine Universitas Muhammadiyah Semarang

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*Faculty of Medicine, Universitas Muhammadiyah Semarang*

**Background**
Motivation is the force that drives a person to do something. Motivation as one of the internal factors can affect GPA (Grade Point Average). Motivation make student try harder and recognizing the importance of high GPA.
**Aims**
The aims of this study is to find out the relationship between entry motivation consist of willingness to sacrifice, readiness to, persistence and GPA student in Medical Faculty University of Muhammadiyah Semarang.
**Methods**
The study used the Cross Sectional approach. Samples were students of the Faculty of Medicine, University of Muhammadiyah Semarang, in the class of 2017 and were taken using total sampling techniques. The instrument used was Strength of Motivation for Medical School-Revised (SMMS-R) and student GPA data. Data analysis used Spearman Rank Correlation test.
**Results**
The sample obtained 107 respondents. The majority of respondents had high motivation to enter medicine (72.0%) and the average index of student cumulative achievement was 2.91. The results of bivariate analysis with the Spearman Rank Correlation test showed that there was no significant relationship between entry motivation and GPA with a value of $p = 0.114$ and $r = 0.154$. The aspect of willingness to sacrifice and readiness to start to study has a greater average score than persistence in studying at the Faculty of Medicine.
**Conclusion**
There is no relationship between entry motivation and GPA student in Medical Faculty University of Muhammadiyah Semarang. Students have high motivation in terms of willingness to sacrifice and readiness to start to study.

## Poster Presentation Group 1

P1-06

### Relationship between Coping Mechanisms and Adaptation Strategies with Culture Shock in Students from Outside Java Island in Faculty of Medicine Universitas Indonesia Academic Year 2015 to 2019

*Sitti Robbyah Nauli Mansur[1], Ardi Findyartini[2,3]*

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**Background**
The mixed of students who come from different ethnicities, religions, languages, and customs enable intercultural contact, which may lead to culture shock. Culture shock can be defined as a feeling of loss, confusion, and a sense of inadequacy because individuals enter a new environment. It can cause stress which is the most common problem experienced by medical students.
**Aims**
The purpose of this study is to assess the relationship between coping mechanisms and adaptation strategies with culture shock of students from out of Java in Faculty of Medicine Universitas Indonesia from academic year 2015 to 2018.
**Methods**
This study was a cross sectional study with a total sampling of students who come out of Java in Faculty of Medicine Universitas Indonesia from Academic Year 2015 to 2018. A total of 91 respondents (response rate = 95%) completed the Brief COPE, Adaptation Strategies, and Culture Shock questionnaires that had been validated in previous studies.
**Results**
There was a significant positive correlation between dysfunctional/maladaptive coping and the incidence of culture shock ($r = 0.284$, $p = 0.006$). On the other hand, there is no significant relationship between adaptation strategies and culture shock ($p > 0.05$).
**Conclusion**
This study shows that dysfunctional/maladaptive coping correlates positively with culture shock whereas adaptation strategy does not correlate with culture shock.

## Poster Presentation Group 1

P1-19

### Developing Profile of Graduate Medical Education: Perception of Core Competences from Students, Lecturer, and Alumni of Faculty of Medicine Universitas Padjadjaran

*Yuni Pratiwi*

*Faculty of Medicine, Universitas Padjadjaran*

**Background**

Competency-based curriculum with problem-based learning approach already been implemented at Medicine Faculty Universitas Padjadjaran (FK Unpad) since 2001. Curriculum was develop using Standar Kompetensi Dokter Indonesia as guidance. Along with the reformation of the health system and rapid change of the health advances challenge, the profile of graduates should be improved by adapting core profesional competences to more specific contexts.

**Aims**

The purpose of this study is to analyze undergraduate students, clerkship students, lecturer and alumni perception of core competencies that Unpad graduates must be achieved.

**Methods**

This was cross sectional study using electronic survey questionnaire. Participant consist four groups: 180 1st year students, 148 clerkship students, 72 lecturer and 48 alumni of FK Unpad. The questionnaire consist the core competencies divided into general competencies and specific competencies. List of competencies previously discussed from Tuning South Asia Project and additional input from curriculum committee of FK Unpad. The participants were asking to rank the most importance core competence

**Results**

There was different perception of the most important core competencies among group. Results for general competencies are 68% 1st year students choose ability to apply knowledge into practice, 53% clerkship students choose ability to carry out lifelong learning and professional development, 51% lecturer choose ability to think critically, reflectively and innovative while 66% alumni choose ability to uphold professionalism, ethics and value. Results for specific competencies are 69 % 1st year students choose ability to integrate clinical and work-up information to make diagnosis and differential diagnosis, 53 % clerkship students and 38 % lecturers choose ability to practice according to standard of competence in various clinical setting, 43% alumni choose ability to provide appropriate therapy with biopsychosocial approach.

**Conclusion**

There is still wide variation of perception of core competencies that must be achieved among students, lecturer and alumni. The variations of perception should be followed with further qualitative study to explore reasoning of the perception. This information is useful for the school as a feedback and as first step to develop profile of graduates so it can be well fit in with the global change.

## Poster Presentation Group 1

P1-26

### Terminology Skill in Midwifery Parasitology Subject First Year Student Year 2018 Universitas Brawijaya: Need More Practicing to Memorizing

*Yulia Dwi Setia[1], Dearikha Karina Mayashinta[1], Nugraha[1], Rahma Dian Hanifariza[2]*

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*[2]Midwifery Study Program, Faculty of Medicine, Universitas Brawijaya*

**Background**
Midwifery program using various type of learning method. Lecture, group discussion, skill, practical learning, and others methods that need to be long term memorized. First year student need to adapt with medical terminology to help them understand factual and procedural knowledge. One of the methods to help first year student to memorize medical terminology by giving them terminology skill.

**Aims**
To know that terminology skill can improve student performance in Midwifery Parasitology subject

**Methods**
Sample that are used are first year midwifery student who learned subject Midwifery Parasitology in year 2017 and year 2018. Group year 2017 are not given terminology skill, otherwise group year 2018 are given skill that contain terminology module, examination and discussion. Final examination that contain all subject material of Midwifery Parasitology were given 2 months after. SPSS 16 are used to analyze with Mann Whitney.

**Results**
Final examination means results between year 2017 and year 2018 were 59,6 ± 1,52 and 60,2 ± 1,79. From test of normality show data variance are not normal then compare means T test cannot be performed. Mann Whitney Test show that there is no significant difference between year 2017 and 2018 (p = 0,527).

**Conclusion**
Terminology skill cannot improve student performance in Midwifery Parasitology subject. Need more practice to attach long term memory.

## Poster Presentation Group 1

P1-33

### Comparison of the Attributes of Ideal Medical Teachers between Preclinical Stage and Clinical Stage According to Medical Students' View in Faculty of Medicine Universitas Indonesia

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**Background**
Medical education consists of two stages of learning, preclinical and clinical. Both stages have different learning methods, so that the ideal medical teacher's attributes in both stages are different.
**Aims**
This study aims to compare the attributes of ideal medical teacher between both stages.
**Methods**
This cross-sectional study using primary data with questionnaire which is reliable (Cronbach's alpha 0.950) with total sample 200 from medical students in third and fifth years.
**Results**
The results of bivariate analysis showed that there were differences in perceptions between preclinical and clinical students on the ideal attributes of medical teacher, such as well-prepared (p 0.010), clinical competence (p 0.028), non-discriminative (p 0.001), interactive teaching (p 0.035), non-judgmental (p 0.005), and provide clear and on-topic assignment (p 0.005).
**Conclusion**
In the preclinical stage, learning methods are more structured with a formal learning environment, and students experience an adaptation process in learning, so that the well-prepared, non-discriminative, non-judgmental, and provide clear and on-topic assignment attributes are considered as ideal attributes. While in the clinical stage, learning methods are more experiential and students are learning more clinical skills with a non-formal learning environment, so that the clinical competent and interactive teaching attributes are considered as important attributes for medical teacher.

## Poster Presentation Group 1

P1-44

### Validity and Reliability of the Indonesian Version of Teacher Stress Inventory (TSI)

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**Background**
Teacher Stress Inventory (TSI), an instrument constructed by Boyle, Borg, Falzon and Baglioni, is an instrument for measuring occupational stress in teachers, and has been widely used in many countries. This study aimed to translate and adapt it for use in Indonesia, and to assess its validity and reliability.

**Aims**
This study aims to obtain a valid and reliable Teacher Stress Inventory instrument in Indonesian version to assess work stress for teachers in Indonesia

**Methods**
Was used for adaptation of the original version of TSI using the method developed by the International Society for Pharmacoeconomics and Outcomes Research guidelines (ISPOR). The guidelines consist of several steps, namely preparation, translation, reconciliation, backward translation, backward translation review, harmonization, cognitive debriefing, cognitive debriefing review, proofreading, and final report, followed by a validity test of items as well as a reliability test. Pearson Product Moment was conducted for validity, reliability was determined by the calculation of Cronbach's alpha coefficient and test-retest reliability using Intra-Class Correlation

**Results**
The result of ISPOR in this research, there were some adjustment of idioms in Indonesian Language. All of 20 items the TSI questionnaire Indonesian Version were all valid (r= 0.577-0.852). The results of reliability test using a-Cronbach is 0,957, and the score of Intra-Class Correlation is 0,901 which means TSI Indonesian version has an acceptable internal stability.

**Conclusion**
TSI Indonesian Version is valid, reliable and has good internal stability. This instrument can be used to assess stress at work among Indonesian teachers.

## Poster Presentation Group 1

P1-45

### Global Prevalence of Burnout in Orthopaedic Surgeons: A Systematic Review

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**Background**
The orthopedic residency program is emotionally, physically and intellectually challenging, placing orthopedic surgeons at risk of burnout. Burnout syndrome is associated with negative impacts both for patients and the surgeon.

**Aims**
The aim of this review is to summarize the available literature on burnout among orthopaedic surgeons and provide recommendations for future work in this field.

**Methods**
Records identified through database searching (Science Direct, PubMed and Google Scholar) with search terms: 'Burnout' AND 'Orthopaedics'; was performed. Inclusion criteria were orthopedic surgeon/resident, written in the English language, and using the Maslach Burnout Inventory as a validated instrument.

**Results**
There were 320 records identified and furthermore 302 were excluded. After full-text were assessed, 12 Studies included in qualitative synthesis for the systematic review. Study design found were cross-sectional and cohort, mainly occurred in a developed country (and one in Nigeria). Burnout rates among orthopedic surgeons are in the range of 7.7–100%, This finding has examined and found burnout symptoms were happened in practicing surgeons, academic leaders, and trainees around the world. Several studies have noted that surgeons, faculty leaders, and trainees suffer different types of burnout at various rates; therefore, those roles must be investigated independently.

**Conclusion**
Burnout is highly prevalent among orthopaedic surgeons, there is a need to assess burnout rates among orthopaedic population sets in other countries and to determine the factors driving burnout in specific populations. High burnout rates among orthopaedic surgeons may need to be addressed through implementation of preventative strategies at the surgeon (e.g. voluntary reduction in work hours), institution (e.g. increase in number of orthopaedic surgeons to decrease workload/surgeon) and government policy (e.g. workshops to help orthopaedic surgeons deal with burnout and its effect'.

## Poster Presentation Group 1

P1-51

### Stressor Domain of the First Year Medical Students in Faculty of Medicine Universitas Pelita Harapan Based on the Results of Medical Student Stressor Questionnaire (MSSQ)

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**Background**
Medical students are vulnerable to stress. By filling out the Medical Student Stressor Questionnaire (MSSQ), students are expected to be able to recognize the stressors and the Faculty could provide the appropriate solutions based on the stressors facing by the students.

**Aims**
Get a description of the stressor domain experienced by the Faculty of Medicine University of Pelita Harapan students batch 2019. This research is the first step of the overall research plan that will be carried out.

**Methods**
The study was conducted by cross sectional (cross sectional) through MSSQ using survey monkey.

**Results**
The data was processed using Microsoft Excel 2010. Total respondents were 217 students, but 2 students were excluded because respondents filled the questionnaire twice time with different answers. Total respondents become 215 consisting of 68 men and 149 women. The results of stressor domain calculation from the highest to the lowest were Academic Related Stressor (ARS): 1,764; Interpersonal and Intrapersonal Related Stressor (IRS): 1,744; Teaching and Learning Related Stressor (TLRS): 1,537; Social Related Stressor (SRS): 1,360; Group Activities Related Stressors (GARS): 1,257; and Drive and Desire Related Stressors (DRS): 1,008. The mean stressor domain was in moderate stress level, which is around 1.01-2.00.

**Conclusion**
The highest domain stressor is the Academic Related Stressor (ARS). So the academic managers need to do an adequate orientation for new batch students, so the stressor would not develop and continues getting worse.

## Poster Presentation Group 1

P1-54

### Developing Leadership Competence and Curricula in Medical Education

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**Background**

A good leadership is a key to increase quality and organization skill in health service.There is a lack in academic leadersip education, therefore to develop leadership skills, we need early exposure in learning, which is integrated in the clinical stage.

**Aims**

The purposed of this review was to develop leadership competencies and curricula in medical education.

**Methods**

This is a systematic literature review.

**Results**

From 41 articles about leadership in medical education, there were seven related with leadership curricula. From seven articles, leadership competencies in medical education were identified. There is communication skill, negotiating skill, managing skill and teamwork,

**Conclusion**

We need to develop leadership curricula in medical education to support professionalism of the future doctor.

## Poster Presentation Group 1

P1-57

### Relationship between Career Self Efficacy, Career Outcome Expectation, Career Intention, and Career Exploration in Career Selection of Nutrition Science Students

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**Background**
The international world agreed that in 2030, Sustainable Development Goals (SDGs) were goals that needed to be achieved well. Given the current focus of the world and Indonesia, especially on the issue of stunting, namely the high number of malnutrition such as low and short body weight. The existence of a nutritionist in Indonesia is needed to improve the welfare of the community. The increasing number of nutritionists in Indonesia shows that career choices for nutritionists are high in demand by the students. The career opportunity of the nutritionists is very vast and vary, so that career planning is an important thing that has a major influence on one's future. Career selection itself can be influenced by many factors, namely student exposure to the nutritional science profession or other factors such as self-efficacy, outcome expectation, career intention and career exploration for students themselves

**Aims**
By using SCCT, this study aimed to determine the career exploration-related behavior relationship, which consists of career self-efficacy, career outcome expectations, career intention and career exploration.

**Methods**
This research is an observational analytic study of 502 samples of nutrition science who have filled out an online questionnaire from July to August 2019. An online questionnaire consisting of a Career Decision Making Self-Efficacy-Short Form (CDMSE-SF), Career Decision Outcome Expectation (CDMOE), Career Exploration Planning or Intention Questionnaire (CEPI), Career Exploration Survey-Revised (CES-R), which has translated and validated. All models are analyzed using the maximum possible estimation of the AMOS application.

**Results**
This research showed that there was a significant relationship between mother's work and career plans after graduation.

**Conclusion**
This study concluded that self-efficacy, outcome expectation, and career intention influence the career exploration of nutrition science students significantly both directly and indirectly.

## Poster Presentation Group 1

P1-68

### Teaching Religion and Spirituality for First Year Medical Students in FMUI

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**Background**
Although positive associations between increased spirituality and better health outcomes is already known, in several medical schools' religion and spirituality are still a hidden curriculum. Religion plays a central role in the lives of Indonesian as stated in the state principle and there are six religions recognized by Indonesian government. Therefore, a religion and spirituality module are considered as a must in our medical curriculum.
**Aims**
to share FMUI's experience in developing and managing religion and spirituality module as an early exposure to softskill and healh issues.
**Methods**
The module consists of four main theme which are maintaining health, birth & childhood, coping with illnesses, and accepting death. Method used are small group discussion within student's own religion followed by plenary session where they shared with students from other religion. Students are required to make self-reflection, developing individual educational material based on their own religion and group educational material
**Results**
small group discussions give the students understanding on their own religion teaching related to the topics and the plenary sessions help to build mutual understanding from others with different religion. Student's self-reflection showed their comprehension of their own religion and others and also how to respect and response to patients' beliefs
**Conclusion**
Teaching religion and spirituality for the first-year student will give a good impact as an early exposure to the student about the role of religion and spirituality in daily life in promoting health, and patient care as a tool both for doctors and patients in coping with illnesses and death.

## Poster Presentation Group 2

P2-01

### The Effect of Microskill Supervisory Model to Improve Supervision Quality among Nursing Students

*Reggi First Trasia*

*Faculty of Medicine, Universitas Sultan Ageng Tirtayasa*

**Background**
Clinical education requires competent supervisor to guide student. Supervisory competency should be trained and closely monitored to ensure quality learning process taking place.
**Aims**
The aim of this study is to evaluate the effect of microskill supervisory model to improve the supervision quality among nursing student.
**Methods**
The research used quantitative approach with quasi experimental design. Subject consisted 89 students of the third year Nursing students at Sultan Ageng Tirtayasa Health Polytechnic. Students were divided into two groups: intervention group (43 students) and control group (46 students) using purposive sampling. Research questionnaire consisted of 21 items which were derived from 5 micro skill domains was used. Intervention was supervision using microskill model during 2 weeks in a rotation of clinical practice.
**Results**
There was no difference of quality clinical supervision was used in the control group while in experiment group the pre and post test score was significantly different. The experiment group had higher quality of supervision. The study showed that only 9 items showed significant improvement of supervision and 12 items did not show any improvement.
**Conclusion**
Clinical teaching using micro skill model is more effective in improving the quality of nursing student clinical supervision compare to the conventional method.

## Poster Presentation Group 2

P2-16

### Methods of Teaching and Learning for Opthalmologists and Residents in Ophthalmology Department Universitas Udayana

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*Department of Opthalmology, Universitas Udayana*

**Background**
Teaching and learning is a part of education process, and to make this process acceptable both for teachers and students is still a challenge. Effective teaching in medicine requires flexibility, energy, and commitment amidst a busy background of clinical care. Successful medical teaching also requires that teachers are able to know learner's needs and understand the variations in learner styles and approaches. Learning refers to the fact that each person has a different way of accumulating knowledge. While some prefer listening to learn better, others need to write or they only need to read the text or see a picture to later remember.

**Aims**
To identify what is style of teaching and learning was preferred by ophthalmologist and residents.

**Methods**
This study was done at Ophthalmology Department Udayana University, on July 2019 by using questionnaire regarding the favorite method of teaching for ophthalmologists and learning for residents. The highest score of learning and teaching methods indicates the most preferred

**Results**
There are 16 Ophthalmologists with mean age 47.44±12.132 years and mean length time as a lecturer are 14.06±11.902 years. The method teaching and learning was preferred are problem based 37.5%, student centered 31.2%, small group 25% and lecture 6.2%. There were 46 residents in our department, median age are 30 years and median length of studied are 30 months. The method of learning was preferred are lecture 32.6%, problem based 28.3%, small group 19.6%, teacher centered 15.2% and student centered 4.3%.

**Conclusion**
The result of this study is very interesting because the lecture method that have been preferred by the ophthalmologist is in contrast to the resident. The ophthalmologist as a teacher need to consider whether the style in which they teach and the style in which residents like to learn are match.

## Poster Presentation Group 2

P2-24

### The New Clinical Skills Learning Process for Medical Students

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**Background**

Clinical skill is one competency that must be achieved by medical student graduate. This skill acquisition learning process held in UII in small group learning with one instructor and parallelly about 15-18 groups. There are many difficulties and weakness in this learning model, such as the difficulty to ensure the same content or technique and to provide a lot of mannequins and instructors in many rooms at the same time.

**Aims**

The aim of this study is to introduce new learning process based on internal evaluation to overcome the difficulties and to increase the quality of skill acquisition process.

**Methods**

The participations were 139 of 4th year undergraduate medical student in emergency block. The students divided into 3 groups. All groups have the schedule of clinical skill in the same day with different time. Each group has the following sequence of activities. The first 30 minutes, 1 supervisor giving explanation, role modelling and discussion. In the next 70 minutes, the students separated into 5-6 small groups, and practicing skill with 1 instructor in each small group, and then followed by next middle group. In the end of block, the survey was carried out about student perception for this new learning process using questionnaire, 83 students filled it.

**Results**

Most students considered agree and strongly agree that this model delivering same content or technique, more chance to practicing skill and getting feedback from instructor, and finally giving them self-confident to passing the OSCE.

**Conclusion**

This effective learning model is good to increase student's clinical skill by optimizing all of faculty resources. It can be solution for medical faculty which has many limitations but still want to reach good clinical skill competencies of their student.

## Poster Presentation Group 2

P2-40

### e-Learning Readiness for Undergraduate Medical Students in the Health Care System Module in Faculty of Medicine

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**Background**
The use of e-Learning method has been required by Universitas Indonesia to be applied in the health system module. Students who will undergo this, are expected to be ready in carrying out this learning system. The abilities related to the readiness of students in e-Learning are the ability to think and proficiency in the use of technology and it is related to cognitive abilities.
**Aims**
This study describes the readiness of students in e-Learning and compares the results with the summative assessment.
**Methods**
The health care system module was implemented in July and August 2019. The participants are 172 medical students in their fourth year, whom still in pre-clinical rotation. The design of this research was cross-sectional for students who were willing to fill out the questionnaire that had been prepared in the SCeLE platform for the health care system module.
**Results**
Obtained 89% and 97.8% of students in Regular and International program, assessed as having readiness in conducting learning methods with e-Learning. While 11% and 2.2% are still considered to be able to undergo this e-Learning method with a change in schedule and habits in order to achieve the specified competencies. Compare to the results of summative assessment, students who are declared ready to undergo the e-Learning method have a higher examination average compared to groups who adjust their schedules and habits.
**Conclusion**
The assessment of e-Learning readiness in both regular and international classes show that students from Faculty of Medicine Universitas Indonesia have good readiness in undergoing the e-Learning method in the Health Service System module. International students have better readiness compared to the Regular in conducting e-Learning methods with SCeLE.

## Poster Presentation Group 2

P2-42

### The Role of Crisis Resource Management Training with High-Fidelity Manikin in Team Anticipation and Task Completion in Timely Manner

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**Background**
Failure in teamwork has been known as one of the causes leading to major side effects and errors in managing emergency cases. There is a strong correlation between teamwork and patient' survival rates. Team training, involving doctors and nurses, is one of the measures required to improve the teamwork in emergency cases. Simulation-based training with the use of high-fidelity manikin, called crisis resource management (CRM) training, was designed to improve the teamwork performance in managing emergency situations.

**Aims**
This study was aimed to measure the role of CRM training in team anticipation and task completion in timely manner when managing emergency conditions.

**Methods**
Subjects recruited for the study were involving 40 nurses, though only 34 included in the end of the study. Subjects were randomly allocated into several groups. Simulation-based interprofessional team training module was specifically designed for the study. The module included interactive lectures, task trainer simulations, emergency simulations, and debriefing sessions. Some groups were additionally trained with CRM module while the others only received regular trainings. Team anticipation and task completion in timely manner were some of the components measured for teamwork evaluation. The evaluation was performed twice, i.e. after the training and six months after the training to evaluate the retention. Measurement tool used to evaluate the subjects was a standardized questionnaire called TEAM (Team Emergency Assessment Measure) by Cooper et al. Collected data was measured by Chi-Square in Statistical Program for Social Sciences (SPSS) version 21.0.

**Results**
Percentage of good team anticipation and task completion in timely manner was significantly higher in teams with CRM module compared to teams without CRM module (100% vs. 47%, $p = 0.0001$; 100% vs. 47%, $p = 0.0001$). However, the evaluation of those two components was not significantly different in both groups after six months (53% vs. 67%, $p = 0.495$; 53% vs. 67%, $p = 0.495$).

**Conclusion**
CRM training was effective in improving team anticipation and task completion in timely manner when managing emergency cases.

## Poster Presentation Group 2

P2-47

### The effect of PBL Approach on Learning Interest of UMI Medical Students

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**Background**
Student learning achievement can be seen from the grades obtained by students who have fulfil some study programs at any level. This achievement become a representation of student's competencies in subjects they have learnt. One of the factors that support success in learning is the presence of students' interest in the learning method presented. Problem based learning (PBL) as one of learning approach has been implemented extensively throughout all medical faculties, including the medical faculty of UMI. This PBL method is expected to increase student interest in learning and ultimately improve students' learning outcomes.

**Aims**
To observe the effect of PBL in increasing the learning interest of UMI Medical Students of batch 2012 and 2013.

**Methods**
It is a quantitative study using a cross sectional approach. Subjects are students of batch 2012-2013 who meet the sample inclusion criteria as many as 200 respondents. Data obtained from the questionnaire and then analyzed by Spearman rank test.

**Results**
There were 192 respondents (96%) considered that the PBL method has worked accordingly, while 8 respondents (4%) considered less appropriate. For the distribution of interest in learning about 11 respondents (5.5%) rated very interested, interested 188 respondents (94%), and less interested 1 respondent (0.5%). The statistical results show a very strong correlation between PBL variables and learning interest (r = 0.93).

**Conclusion**
The problem based learning (PBL) method was evidently increasing the learning interest of UMI medical students. This method turns the student from passive information recipient to active, free self-learner and problem solver, and it slides the emphasis of educational programs from teaching to learning. This model enables the student to learn new knowledge by facing him/her the problems to be solved, instead of burdened contents.

## Poster Presentation Group 2

P2-49

### Experience Based Learning (ExBL) in Pre-Internship Module Faculty of Medicine Universitas Indonesia

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**Background**
The Pre-Internship Module is a module that is conducted collaboratively across departments for 16 weeks at the final year of clinical practice.
**Aims**
The purpose of this paper is to describe the implementation of Experience Based Learning (ExBL) in the Pre-Internship Module FMUI.
**Methods**
ExBL consist of SPARC: Support (organization, pedagogic, and affective), Participation (observation, simulation, and practice), Real patient learning, and Capability (knowledge, practice, affective). Each of the domains will be described in accordance to the related activities in the Pre-Internship Module.
**Results**
The support for module has been conducted in the form of administrative and management across department, as well as cooperation with hospital and other educational field cooperation unit, medical education unit, and faculty. The adult learning process, indoor and outdoor, are supported by technology that enables distance learning both formal and informal. In addition, the frequency of intense meeting field tutor and home tutor, at least 1x / week (including field visits) are expected to be a media for observing student behavior, knowledge, and target achievement. This can be an example active participation of both students and mentors. The orientation become the media which give students the opportunity to exercise before field practice. Student exposure to the field hospitals, community health centers, and clinics are examples of showing real patient settings in accordance to graduates' workplaces. Cognitive capacity, skills, and behavior are known through various assessments such as MCQ, CBD, Mini-CEX, DOPS, and 360 degrees.
**Conclusion**
Pre-Internship Module is already in accordance to ExBL learning domains. However, it still needs to strengthen the cross-departmental teaching staff as well as clinical teacher training for field supervisors. Moreover, additional join cooperation with other healthcare facilities is are also important as part of the faculties and health facilities accreditation.

## Poster Presentation Group 2

P2-58

### Role Play as Practical Bioethics and Medicolegal Learning in FMUI

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**Background**

In accordance with Law Number 20 Year 2013 regarding Medical Education, every medical faculty is required to guarantee the learning of bioethics & health humanities pillar of medical sciences through its lecturers and laboratories. Strengthening the standard format of learning methods is needed to solve medical malpractice issues and increase public legal awareness, especially in achieving noble professional competences (the most important and fundamental one for every doctor).

**Aims**

The purpose of the study describes the experience of practical ways of roleplay as a method of teaching and learning ethics, discipline and medical law

**Methods**

To every group of students who have clinical rotation in the Department of Forensic Medicine & Medicolegal Studies FKUI / RSCM since at least 5 years ago, were given MKEK and MKDKI's respective roles during hearing and imposing ethical sanctions or disciplines to bad doctors. Ethical references using: KODEKI 2012 and Procedural Guidelines of MKEK IDI 2018 and disciplinary references: Council Regulation Number 4 of 2011 concerning Types of Disciplinary Violations and Number 50 of 2017 concerning Procedures for Disciplinary Violations. Also civil or criminal law regarding medical malpractice experienced by doctors.

**Results**

The teacher gives a trigger case. Students are asked to choose one type of trial and creatively use lecture room facilities as a "mini studio" stage (a substitute for bioethics-health humanities laboratories). Students discuss independently the preparation phase, determine the theme of the chosen manuscript which has the following characteristics: (a) potential for doctor versus patient debates; (b) arguing KDB's checklists (autonomy / justice versus beneficence / non-maleficence), (c) effort versus outcome agreement, including the elaboration of problem doctors and ethico-legal conflicts among them, then each student plays the character of the main or supporting actor according to the list of roles supervised by the director, a series of exercises: trying, acting and acting using simple self-supporting properties (costumes, audiovisual teaching materials, Blackman assistance according to scenes and place settings) for 45-90 minutes duration performances.

**Conclusion**

Teacher's feedback: the manuscript's quality, originality of the story, courtesy of the scene assembly procedure, the storyline / scene, creativity, expressions of comprehension, completeness of properties, completeness of the substance, depth of contextual argument, KDB implementation, compactness of all group members, clinical suitability and post-feedback reflection specifically revealing professional crimes in the health sector, amicus curiae, detachment, independent and impartiality.

## Poster Presentation Group 2

P2-61

### Adaptation of Medical Professionals in the Future Era of Medicine 4.0

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**Background**

The concept of medicine 4.0 arises from the ever-changing development of the medical field, resulting in the need for adaptation and relearning from individuals working as medical professionals such as doctors. As the world progresses, doctors working in health services are faced with multiple challenges regarding the development of medical technologies. These advancements can be influencing the roles that doctors play within the medical field since technological ability might achieve results in faster ways with lesser efforts. As time progresses and artificial intelligence reliability becomes more credible, the use of that technology will definitely be given more responsibility.

**Aims**

Looking at all these possibilities, we want to find the answer to how doctors and medical professionals might fit in.

**Methods**

We do a simple literature review of the newest references regarding this topic. We Included 4 articles from the international journal, 1 medical school website, and 1 article written by an expert in this field in Indonesia context. We do a full reading of all articles, analysis the way to adapt to the advancement of technology and synthesis the propose ways to adapt to the change.

**Results**

Evidence shows that medical professionals should prioritize optimism, communication, collaboration, anticipation, and direct simulation. All these things mentioned are integral in making sure doctors are able to treat their patients without feeling overwhelmed with all the technology involved in their work because at the end of the day their main aim is to manage patients, not technology

**Conclusion**

The medical professionals are encouraged to keep up with new advancements in technology instead of feeling threatened by its existence. There is no denying that the era of medicine 4.0 consisting of many roles played by technology will be a significant part of the future. Nevertheless, doctors are still needed to ground the basic skills of medicine through all the dynamics proposed by ever-changing medical technology and human relation between doctors and patients will not be able to be replaced by technology.

## Poster Presentation Group 2

P2-63

### Correlation of Conceptual Map Score with Knowledge Retention and Reasoning of Medical Students

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**Background**
Previous research tried to find the effect of conceptual map towards learning. However, only a few found which component in conceptual map that related with learning achievement.

**Aims**
This study aimed to see relationship between conceptual map score and the components with students' retention and reasoning

**Methods**
This was a cross sectional study. Total population of 3rd year undergraduate students at FM Nommensen underwent Integumentary System block were participated in this study. Students were asked to make individual concept map in one 30 minutes session every week based on materials in each tutorial. Two independent raters evaluated each elements of conceptual map score and also the total scores of each conceptual map. Short essay was used to test retention of knowledge and MCQ were used to rate student reasoning. The tests were done one week after the last conceptual map writing session. Scores of conceptual map and tests score were analyzed with Person correlation test.

**Results**
There were 144 conceptual maps were gathered from 48 students. There were significant correlation between conceptual map score and students ability to recall ($r = 0.43$; $p<0.01$) On the other hands, there were no association between concept map score and students' reasoning ($p< 0.01$). The more proposition in students conceptual map, the better the students reasoning ($r = 0.33$; $p<0.05$).

**Conclusion**
Conceptual map writing could facilitate students retention and reasoning ability.

## Poster Presentation Group 2

P2-67

### Medical Student Preferences of Learning Activities at the Faculty of Medicine Universitas Udayana 2019

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**Background**
There is a shift away from conventional lecture-based learning activity in medical education. This profound changes and innovations of medical education aimed to combine the basic science and clinical knowledge better as to meet recent demand. There are many studies comparing effectiveness of traditional lecture-based with recent learning activity, but there's a limited study on how today generation students prefer those modern learning activities. As there is established evidence of students' preferences of learning activity will have a role in their academic process, understanding student preferences will provide significant clue in achieving best academic outcome.
**Aims**
The objective of this study is to see medical students' preferences of the learning activities used in the faculty
**Methods**
This cross-sectional study was performed from May to September 2019 to all students in the 3rd, 5th, and 7th semester at the Faculty of Medicine, Udayana University. Each student was given six questions using 5-point Likert-scale about learning activities and its ranking. We used SPSS 20.0 to analyze using descriptive analysis, Kruskal-Wallis test followed by Mann-Whitney test, and *chi-square* test.
**Results**
There were 611 students included in this study. Five learning activities received a positive response (p=<0.05) among students. Students ranked lecture (82%), laboratory practice (50.7%), and basic clinical skills (56.8%) as their top three learning activities with statistical significance compared to students who rank these as their bottom three (p=<0.05).
**Conclusion**
Five learning activities receive positive response and lecture is still the most favorable learning activity among medical students.

## Poster Presentation Group 3

P3-11

### Level of Self-Reflection in the Learning of Medical Students Universitas Malahayati Batch 2015 in 2019

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*Medical Faculty of Malahayati University*

**Background**
Self-reflection is a major element of professionalism. In the context of education can be realized as a process or action to look back to the past with the aim to process the experience gained so that it can be evaluated and interpreted. Medical students 2015 of Malahayati University is the final year students who will study in the medical profession should be able to know the importance of self-reflection, is able to reflect themselves well and determine what steps should be done in supporting the success when taking education medical profession later.

**Aims**
To identified the level of self-reflection in the learning of medical students 2015 of Malahayati University in 2019

**Methods**
This research type is quantitative with descriptive survey using accidental sampling method. Total student population Malahayati University School of Medicine class of 2015.

**Results**
Obtained a sample of 158 respondents. The level of self-reflection in the learning of students Faculty of Medicine 2015 University of Malahayati in 2019 mostly had a high level of self-reflection as many as 102 respondents (64.6%), medium self-reflection were as many as 55 respondents (34,8%) and low self-reflection as many as 1 respondents (0.6%).

**Conclusion**
The level of self-reflection in the learning of students Faculty of Medicine 2015 University of Malahayati in 2019 mostly has a high level of self-reflection.

## Poster Presentation Group 3

P3-12

### Students' Perception as an Institutional Challenge: Dynamics of Students' Perception toward Learning Environment at Syiah Kuala University Faculty of Medicine

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**Background**
The learning environment at medical education institution is a concoction of curriculum application and learning methods, performance of educators and educational staffs, and students' adaptability. Assessment of students' subjective experience is an important thing to do in order to determine the quality of learning environment. The result of the assessment is an input for educational institution to develop a comfortable learning environment for students without compromising the standard and quality of learning.

**Aims**
This study aims to measure the perceptions of first, second and third year students toward learning environment at Bachelor Programme of Faculty of Medicine, Syiah Kuala University.

**Methods**
Cross-sectional study was conducted on 418 students of the Bachelor Programme of Faculty of Medicine, Syiah Kuala University consisting of second, fourth and sixth semester students. Measurement of students' perceptions toward learning environment is conducted using the Dundee Ready Education Environment Measure (DREEM) questionnaire that has been translated into Indonesian. Statistical test was conducted to obtain the differences in student perceptions between each year.

**Results**
The students' perceptions toward learning environment at Bachelor Programme of Faculty of Medicine, Syiah Kuala University is generally good (means = 185.87). However, there is a significant difference between the first year and the second year students ($p = 0.001$) and between the first year and the third year students ($p = 0.002$), but no differences were found between the second year and the third year students ($p = 0.760$).

**Conclusion**
From this study it can be concluded that there was a decrease in perception scores between first year students and second and third year students. This is a challenge for the Bachelor Programme of Faculty of Medicine, Syiah Kuala University in order to increase the students' experienced learning convenience.

## Poster Presentation Group 3

P3-13

### Student Perception of Using Logbooks as Learning Media for Prescription Writing in Block 3.4

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**Background**
Prescription writing is one of the competencies that must be mastered by a doctor. Learning methods of prescription writing designs have been developed, but the results of achieving doctor's prescription writing skills are still not satisfactory. The logbook of prescription writing was developed to be a learning media for prescription writing that was not only effective but also acceptable to students.
**Aims**
The purpose of this study was to determine student perceptions of using logbooks as a learning method for prescription writing.
**Methods**
Sixteen of the 20 students who volunteered to take part in the logbook development study as a prescription writing learning media completed the post-use prescription logbook evaluation questionnaire. The questionnaire consisted of 10 questions with a Likert scale and eight open questions evaluating the use of the logbook as a learning method for prescription writing.
**Results**
The majority of students stated that prescribing logbooks helped to be able to learn to write prescription correctly, and all parts of the logbook are essential. While 56.25 % students saw that in terms of clarity of orders, it was only considered sufficient. There were three main themes from the open-ended question analysis, namely the usefulness of logbooks in prescription writing, barriers to filling in logbooks due to unfamiliar terminology and the concept of dose selection and proposed development logbook.
**Conclusion**
In this study, generally, the perception of students about the use of logbooks as a learning media for prescription writing was positive. This study also shows the terminology in prescribing and related aspects of prescribing including the selection of doses to be improved in.

## Poster Presentation Group 3

P3-14

### Internal Formative Assessment as Predictor for National Examination Computer-Based Score

*Yuni Pratiwi*

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**Background**
National Examination Computer-Based Score (CBT UKMPPD) can be a valuable standard regarding students' performance and competence. Many efforts have been done by the school to achieve satisfactory level of national examination score. CBT UKMPPD is a tool to evaluate the cognitive and clinical reasoning skills of medical students in Indonesia
**Aims**
The objective was to analyze the correlation between internal formative assessment score and AIPKI try out with CBT UKMPPD score
**Methods**
This was descriptive analytic study with target population of the study was all students of batch 2014 that followed internal formative assessment, AIPKI try out and CBT UKMPPD test. Data was analyzed using quantitative statistics. The relationship between the scores was determined by calculating correlation coefficient and results presented using tables and graphs with the aid of SPSS.
**Results**
Both of internal formative assessment score and AIPKI try out correlate with CBT UKMPPD score. This correlation maybe due to good practice of item development and review, the quality of the item developer and reviewer and the education process in school itself
**Conclusion**
Good quality of internal formative assessment can be a valuable predictor for successful rate of student's performance in national examination.

## Poster Presentation Group 3

P3-15

### Comparing the results of OSCE in blocks based on the CSL delivering Methods (main and review CSL)

*Shulhana Mokhtar, Nesyana Nurmadilla, Zulfiyah Surdam*

*Faculty of Medicine, Universitas Muslim Indonesia*

**Background**
Clinical skills learning (CSL) in Faculty of Medicine, Universitas Muslim Indonesia has become activities that require a large amount of effort. The ability of students in doing some skills can be seen during clinical skills examination. For undergraduate students, the skills were assessed in the format of Block OSCE. In the beginning of competence based curriculum implemented in UMI, each of clinical skills was delivered in 3 hours namely 2 hours as the main CSL and 1 hour as the review CSL, then the examination was run at the end of the blocks. Since the second semester of 2018-2019, the delivering of CSL was reversed of 1 hour as the main CSL and 2 hours as the review CSL.

**Aims**
The aim of this study is to compare the results of OSCE for both CSL delivering method.
The data were obtained from medical education unit (MEU). There were OSCE results of batch students 2016 and 2017 in both block Cardiology and block Endocrine and Metabolism. Student of 2016 underwent 2 hours main CSL and 1-hour review CSL while students of 2017 underwent 1 hour main CSL and 2 hours review CSL. The difference between groups was analyzed using chi-square.

**Methods**
The data were obtained from medical education unit (MEU). There were OSCE results of batch students 2016 and 2017 in both block Cardiology and block Endocrine and Metabolism. Student of 2016 underwent 2 hours main CSL and 1-hour review CSL while students of 2017 underwent 1 hour main CSL and 2-hour review CSL. The difference between groups was analyzed using chi-square.

**Results**
There were 176 students of 2016 who participated in the OSCE of Endocrine Block compared to 158 students of 2017 on the same block. The result was not significantly different between two groups. In the block Cardiology, 172 students of 2016 participated in the OSCE compared to 159 students of 2017. There was significant difference between groups. Significant results also existed when the total number of student 2016 compared to total number of student 2017 who participated in the OSCE ($p < 0.05$).

**Conclusion**
The results of OSCE were higher in the group with a reversed CSL delivering method.

## Poster Presentation Group 3

P3-27

### Examining the Use of Two Instruments to Assess Reflective Writing in Undergraduate Professionalism Course

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**Background**
Reflective writing is increasingly used in teaching professionalism. It allows students to make meaning of their learning experiences which leads to development of new perspectives. There are four levels of reflection according to Kember et al (2008) from habitual action to critical reflection. Because assessment drives learning, an evaluation towards the quality of students' reflective writing is required.

**Aims**
This study is aimed at examining the inter rater agreement of two different instruments in assessing students' reflective writing in undergraduate professionalism course.

**Methods**
Two instruments of which the scales were based on the four level of reflection were identified and their contents were assessed for the suitability to measure reflective writing. Instruments from Kember et al (2008) and Wald et al (2012) will be used to assess students' reflective writing. Following sample size calculation by Power Analysis and Sample Size (PASS) table we randomly selected 63 students' reflective writing from undergraduate professional course were randomly selected. Following a discussion to obtain similar perceptions towards the instruments, two raters independently assess students' reflective writing. Intra-class correlation analysis was applied to determine the inter-rater agreement of the reflective writing assessment.

**Results**
The analysis is underway and will be reported during the conference presentation.

**Conclusion**
The analysis is underway and will be reported during the conference presentation.

## Poster Presentation Group 3

P3-32

### Relationship Between e-Professionalism Knowledge on the Utilization of Social Media by Regular Students of Faculty of Medicine Universitas Indonesia Batch 2014

*Anindhita Soekowati[1], Ardi Findyartini[2,3]*

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**Background**
Technological developments have influenced the current higher education system, not least the Medical Profession Student Competency Test (UKMPPD) which currently uses the CBT (Computer-Based Test) system. The readiness of students to take-part in the UKMPPD can be measured by their ability in answering questions using the CBT and the level of their knowledge refer to the Indonesian Doctors Competency Standards.
**Aims**
The aim of this study is to evaluate the effect of microskill supervisory model to improve the supervision quality among nursing student.
**Methods**
104 medical profession students of FK Unsrat participated in the UKMPPD Online CBT Trial conducted by the Ministry of Research, Technology and Higher Education totaling 200 questions and the results were institutionally analyzed using descriptive method.
**Results**
Based on the result, FK Unsrat students get higher average score (62.68) than the national average (57.65). From the results of the institutions released by the Ministry of Research, Technology and Higher Education, there are 7 reviews that contain aspects for the implementation of doctor competency tests. From the average score of correct answer to the number of questions, FK Unsrat medical profession students get lower scores only on 4 aspects, namely; Recall aspects (Review 3), Other System aspects (Review 4), National Health aspects (Review 5), and aspects of Health Promotion/Disease Prevention (Review 6). Apart from the 4 aspects in all reviews, medical profession students of FK Unsrat get a higher percentage of results compared to the another medical profession student nationally.
**Conclusion**
The higher average score than the national average in the UKMPPD online CBT trial, indicates that medical profession students of FK Unsrat are ready to take the CBT competency test in August 2019.

## Poster Presentation Group 3

P3-35

### Analysis of Readiness of Medical Profession Students for Computer-Based Competency Test Online at Sam Ratulangi University

*Anggun Rizty Proklamasia Layuck, Herlina Ineke Surjane Wungou, Billy Johnson Kepel*

*Faculty of Medicine, Universitas Sam Ratulangi*

**Background**
Technological developments have influenced the current higher education system, not least the Medical Profession Student Competency Test (UKMPPD) which currently uses the CBT (Computer-Based Test) system. The readiness of students to take-part in the UKMPPD can be measured by their ability in answering questions using the CBT and the level of their knowledge refer to the Indonesian Doctors Competency Standards.

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**Conclusion**
The higher average score than the national average in the UKMPPD online CBT trial, indicates that medical profession students of FK Unsrat are ready to take the CBT competency test in August 2019.

## Poster Presentation Group 3

P3-38

### Graduation Constraints of Retaker Students of Medical Profession Study Program at Faculty of Medicine Sam Ratulangi University

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**Background**
Student competency test of Doctor profession study program that known as UKMPPD has become an exit exam for become a medical doctor in Indonesia. It is held fourth times a year on February, May, August and November. The test is carried out through 2 stages, namely the knowledge test, which is tested through 200 multiple-choice questions in the form of computer-based test (CBT) and the Objective Structured Clinical Examination (OSCE) practice test. Students who are not pass their first attempt will be categorized as re-taker. The number of re-taker at Faculty of medicine Sam Ratulangi are quite high leading to study program manager put more attention to lower these number. Several ways have been taken to assist those students to pass the exams but few of them have taken advantages with the programs.

**Aims**
This study aims to explore the obstacles found by re-taker in their UKMPPD test and their perspectives regarding role of the institution during their study

**Methods**
This research is a qualitative study that asking 6 re-takers by telephoning, distributing questions via What's-Up accompany with conversations if needed, and emailing those respondents several questions that has been arranged by Medical Education Unit Members. The questions include internal and external factors that may affect their graduation. The answer has been collected, transcript ed, coded and interpreted

**Results**
Six re-takers have been participated in this study consist of 5 females and 1 male. The time of re-taker vary from 2 to 16 times. Three of them mention time constraints as a factor that may affect their failures. Hard questions and confusing answers also stated by four respondents. Regarding role of faculty member and study program all respondents' statements are good, while one re-taker confesses department participations is still need to be improved. One respondent stated that passing the Try Out Examination by AIPKI, Indonesia' medical college association, should not be a requirement to follow the UKMPPD.

**Conclusion**
Difficult questions and insufficient exam time are mentioned as the main reasons complained by re-takers of UKMPPD. The role of institutions and faculty member is considered quite good. Those issue need to be addressed properly and comprehensively to increase the graduation rate of Faculty of Medicine University of Sam Ratulangi.

## Poster Presentation Group 3

P3-50

### The Effect of Self-Reflection on Student Learning in the Basic Disease Mechanism Block

*Ade Kiki Riezky, Putri Melisa*

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**Background**
Self-reflection makes students aware of failure and then plans to improve their skills. Self-reflection aims to increase awareness and understanding in learning.
**Aims**
The purpose of this study was to determine the effect of self-reflection training on the performance of pre-clinic students.
**Methods**
The study design used an experimental study. Data were collected using a questionnaire and secondary data from the student assessment department. Samples were pre-clinical students who are following the basic mechanism block of the disease
of the Medical Education Study Program at the Faculty of Medicine, Abulyatama University. The sample was divided into 2 groups, the observation group (n = 28) and the control group (n = 28). Before starting the training, both groups were given a pre-test. After completing the observation period, both groups were given a post-test. Data analysis using paired t-test with a value of $\alpha = 0.05$.
**Results**
The results showed in the intervention group, as many as 28 students (100%) passed the block exam, in the control group as many as 27 people passed the test (96.4%). Paired t-test results of the intervention group $p = 0.208$ and the control group $p = 0.235$.
**Conclusion**
The conclusion is self-reflection does not have a significant effect on passing the exam block.

## Poster Presentation Group 3

P3-52

### Students' Perception of Script Concordance Test in Assessing Diagnosis and Therapeutic Ability at Clinical Rotation of Pediatric Faculty of Medicine

*Yeny Dyah Cahyaningrum, Anandyo Septiawan*

*Medical Education Department, Faculty of Medicine, Universitas Islam Indonesia*

**Background**
Good judgment is needed to assess professional physicians in practice. This assessment can measure student performance related to physician ability professionally and show clinical reasoning ability. Assessment is done by giving clinical case with uncertainty that faced in community service. Student perception research on the measuring tool is done to see the student's view of measuring instruments that test the knowledge in accordance with real settings.

**Aims**
This study aims to determine the perception of students on giving SCT (Script Concordance Test) to the ability of diagnosis and therapy.

**Methods**
This research was conducted by qualitative research with thematic analysis. Focus group discussions (FGD) are conducted on medical students who have completed the Pediatric clinical rotation and have worked on Multiple Choice Questions (MCQs) and SCT at the end of the clinical rotation.

**Results**
Student perceptions of SCT are categorized into 4 themes. Their perception of SCT, ability in diagnosis, investigation, and therapy. Several information on SCT, variations in therapy, and some differences in diagnosis appear as part of students' perceptions of SCT. The vignette of SCT seemed to be a real case that found in clinical education. Emotional responses also appear to be given as a feeling of confusion, in contrast to MCQ, it needs clinical decisions in working on SCT. SCT is a measurement tool that can be used to assess diagnostic and therapeutic abilities in clinical education.

**Conclusion**
The ability of students in diagnosing in clinical education can be assessed with uncertain clinical cases. It was said by students that they feel more tested about the understanding of diagnosis with SCT.

## Poster Presentation Group 3

P3-59

### Learning in the Laboratory: How Medical Students Appraise the Educational Environment

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**Background**
Learning in the laboratory has been carried out as one of UMI medical students' activity where they are trained to use variance of sense organs and of tools to make examination of cases. As one of activity, it needs educational environment that has an impact on learning, wellbeing, student involvement, faculty and learner satisfaction, successful performance, and faculty teaching. A few things that can be considered part of the educational environment are physical facilities, teaching methodologies, assessment procedures, timetabling, teacher's competencies etc.

**Aims**
The aim of this study is to discover the implementation of learning in the laboratory from students' point of view.

**Methods**
This study is using cross sectional approach where data obtained from questionnaire collected in a link from google form. Research subjects are students of class 2017 (127 students) and 2018 (175 students). Data then analyzed by descriptive statistics and Mann Whitney test.

**Results**
The questionnaire consisted of three components. In general, students have good appraisal about educational environment with higher value in the class 2018. Based on students' class, significant difference was only found in the aspects of information, facilities and infrastructure ($p = 0.002$). While from the aspect of human resources and aspects of learning resources and examinations there were no significant differences between the classes of 2017 and 2018 ($p = 0.079$ and $p = 0.052$ in sequence)

**Conclusion**
It is reasonable to expect student groups will experience the educational environment in different ways. The difference of appraisal in the aspect of information, facilities and infrastructure between the classes of 2017 and 2018 shows that there is an improvement in those aspects.

the 12th Jakarta Meeting on Medical Education 2019 (JAKMED 2019) expresses sincere gratitude to the following companies for the support of this conference:

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