The New RANZCOG Curriculum

Eleanor Long, Chief Executive Officer RANZCOG* Kenneth Clark, Senior Vice-President RANZCOG*

* Royal Australian and New Zealand College Ostetricians and Gynaecologists

A new Royal Australian and New Zealand College of Obstetricians and Gynaecologist (RANZCOG) curriculum has been introduced. Subtitled 'a framework to guide the training and practice of specialist obstetricians and gynaecologists', the curriculum was launched at the College's Annual Scientific Meeting in Auckland, New Zealand, in September 2003. Almost one-half of Trainees registered in the Membership of the College (MRANZCOG) training program are now engaged in the course of study presented in the new curriculum.

As its subtitle suggests, the new curriculum is more than a handbook of study topics and training regulations. The RANZCOG curriculum is an educational plan that is designed to bring about change. It articulates what it means to practice as, and to be, a specialist obstetrician gynaecologist in an increasingly complex and challenging healthcare environment. It defines the areas of knowledge and understanding that are now fundamental to the specialty, and the skills and abilities that characterise up-to-date practice.

Significantly, the RANZCOG curriculum is a declaration of the roles and responsibilities assumed by the specialty. It spells out the service contract that the specialty has with society. In line with current comment on the practice of medicine, there is an emphasis on the professional qualities expected of each of its practitioners. This concept of professionalism includes high standards of ethical conduct and a commitment to the best interests of the patient, supported by ongoing and purposeful professional development.

A curriculum is a relatively new concept in medical education, and particularly in specialist

Keywords: Curriculum, RANZCOG

J Med Assoc Thai 2004; 87(Suppl 3): S161-3

education. Traditionally, preparation for entry into a specialty followed the craft-group apprenticeship model, involving hands-on instruction in core skills, aided by supervised practice. Arguably, the process was an initiation into a distinctive culture, as much as one of professional education.

More recently, the scope of training has been defined by a syllabus listing medical topics and procedures. Indeed, for some years now, the College has included a syllabus in the training program handbook. However, a syllabus is an insufficient document to guide a training program. It tries to tell in one-dimensional fashion the complexity of expectations within a multifaceted educational process.

A curriculum, however, is designed to capture the dynamics of the educational process. A curriculum presents the required network of experiences, understanding, skills and attributes in a logical and coherent fashion. A curriculum enables users to interpret how the course of study might be translated into action and achievement.

The RANZCOG curriculum is based on a model outlined in a seminal work entitled 'Basic Principles of Curriculum and Instruction' by Ralph Tyler, published in 1949⁽¹⁾. Tyler's principles have stood the test of time and are still widely used in curriculum design. He argued that to develop a curriculum one should pose four fundamental questions:

• What are the educational purposes of the intended program?

• What are the educational environments and experiences that are likely to achieve these objectives?

• How might these environments and experiences be organised effectively?

• How might we determine the extent to which these purposes are being achieved?

These questions give a structure to the curriculum in terms of objectives, selection of content and learning methods, organisation of the learning experiences, the assessment of learners and evaluation of the program.

Correspondence to :Long E, Chief Executive Officer, Royal Australian and New Zealand College Ostetricians and Gynaecologists

The RANZCOG curriculum has followed this systematic plan to articulate the transition of a newly graduated medical practitioner to a specialist obstetrician and gynaecologist. A wide process of consulta-tion has enabled new and experienced Fellows, Trainees, consumers, allied healthcare staff and educationists to identify and develop optimal ways of achieving this transition. While some learning and assessment methods have been retained, the curriculum also includes aspects that are new to College training.

The essence of the College's new curriculum is the clear description of the expectations of a Trainee if he or she is to become a fellow of the RANZCOG the knowledge they should acquire, the clinical skills they should possess, and the professional qualities they should develop and exhibit.

To enable a Trainee to achieve these goals, revisions to the membership training program have been necessary and indeed these changes have been integrated into the Curriculum document. The key changes to the Training Program are: the introduction of the Flexible Learning Program (FLP) as a replacement for the Distance Education Program (DEP); introduction of a credentialing process for gynaecological surgical procedures and for obstetric procedures; a mandatory research project; an inability to commence subspecialty training until the sixth year of training; changes in timing of the written and oral membership examinations; and, finally, introduction of a further workshop and adjustments to 6-monthly training reports to replace the Clinical Skills In-hospital Assessment.

Underpinning the curriculum is the FLP, an educational tool using information technology and adult learning principles. This web-based resource enables keyboard access to core clinical and scientific knowledge through readings that define the scope and focus of study expected for successful attainment of the requirements for MRANZCOG Importantly, the web-based technology enables easy updating and modification of these resources. This huge step forward sees the FLP as a genuine educational resource for all Fellows, rather than just the Trainees of our College. This adds further substance to the concept of lifelong learning within our speciality.

Introduction of a credentialing process for gynaecological surgical procedures and for obstetric procedures sees key procedures being identified as reasonable performance objectives for Trainees to achieve by the end of the second year of training. Satisfactory performance in a further set of selected procedures is to be achieved by the end of the fifth year of training. Careful consideration is taking place as to appropriate assessment modalities to be instigated within this process.

A research project is a mandatory component of the revised training program. This addition signals the clear recognition that research experience is a fundamental component in the training of a specialist obstetrician and gynaecologist. It is also to be hoped that such experience stimulates interest in and recruitment into academic obstetrics and gynaecology. Great thought and deliberation has gone in to the development of this new aspect of training - the RANZCOG Council quite rightly demanded that the project be achievable and realistic for Trainees. It is also evident that the College Fellowship, and more particularly those Fellows with academic appointments, will be called upon to provide our Trainees with considerable support if they are to fulfil this requirement. Trainees will be required to have their proposal for a research project accepted by the end of the third year of the training program, with the project satisfactorily completed prior to the award of Fellowship.

Trainees will not be able to commence subspecialty training until the sixth year of the program. Wide consultation revealed a strong belief that it is necessary for Trainees to spend a minimum of 5 years, in varied, general obstetrics and gynaecology if they are to be adequately equipped for specialist practice.

The written examination will be able to be attempted at any time from the beginning of the third year of the training program. The oral examination will not be able to be taken until the second half of the fourth year of training and there will need to be a minimum of 6 months between the taking of the two examinations. It is fair to say that the written examination will continue to test the knowledge base of Trainees while the oral examination will increasingly explore the clinical skills and professional qualities of the Trainees.

Within the training program a series of workshops provide essential resources to augment the FLP. Designed to enhance hospital-based apprenticeship learning, the workshops cover specific areas such as surgical skills, communication, research methods and the principles of teaching and assessment. The pre-existing Communication Skills In-Hospital Assessment will be replaced by a workshop and by adjustments to 6-monthly training reports.

All elements of the curriculum and the revised training program will be relevant to the Trainees commencing training over the best arrangements for all pre-existing membership Trainees. Guiding principles in these discussions have been: fairness, clarity of process, and administrative realities. Existing Trainees have received detailed information as to what their personal transition arrangements are.

It is self-evident that the RANZCOG curriculum and training program will require constant review and measured revision over the coming years. Although implementation of the new curriculum and the revised training program will be challenging, and at times daunting, the result will be a modern, tailored and responsive platform for what is arguably the most vital part of our core business - the training, assessment, and accreditation of the future fellowship of our College.

References

1. Tyler RW. Basic Principles of Curriculum and Instruction.

Reprinted with permission:

Australian and New Zealand Journal of Obstetrics and Gynaecology 2004, 44: 1-2: Guest Editorial