

Do Medical Professionals Need Skill  
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## Editorial

Not only a medical post-graduate, but also a medical graduate is a professional in all respects. What is required of a professional is skill, knowledge and professionalism. During the undergraduate and post-graduate training programs in any field of medicine, knowledge is the only area focused on presently; the other aspects remain behind the curtain. In the current scenario, how can a medical graduate or post-graduate cope with the challenges of emerging trends in healthcare? What has changed is the consumer (patient), with the attitude of a consumer in a patient leading to the doctor-patient relationship, with increasing media awareness, with increased use of internet and with availability of plenty of social media for communication and spreading the word about the medical professionals. What has also changed is the emergence of corporate hospitals, explosion of technology and dynamic market forces. Taking into account all of these, today medical profession is not limited to medical treatment, it involves various other skills and professionalism to be able to deal with the current scenarios appropriately.

Skill has been defined differently by various groups. A skill is learning to carry out a task with pre-determined results often within a given amount of time, energy, or both, and can be divided into domain general and domain-specific skills [1].

The general skills which a medical graduate and post-graduate must acquire are the cognitive, communication, sensory, motor and social skills necessary to interview, examine and counsel patients. The domain specific skills would include the applied knowledge of the subject to competently complete certain technical procedures in a reasonable time while ensuring patient safety.

Skill is also defined as an ability and capacity acquired through deliberate, systematic, and sustained effort to smoothly and adaptively carryout complex activities or job functions involving ideas (cognitive skills), things (technical skills), and/or people (interpersonal skills) [2].

The question which now arises is whether these general skills, also known as soft skills, are taught in the medical schools. Skill development in medical schools requires certain environmental stimuli and situations to assess the level of skill being shown and used. Is there adequate infrastructure for skill development in undergraduate and post-graduate medical education?

In the 21<sup>st</sup> century, the medical institutions must modify the processes of training, learning and assessment to produce efficient medical graduates and specialists. ATCOM (Attitude and Communication Module) has been introduced in the Indian undergraduate medical education curriculum by the Medical Council of India and is awaiting implementation. The question still remains for those who did not have an opportunity to study the reformed curriculum and go through the training process formally. In the interim, it is imperative that the medical teachers take the lead in enhancing the clinical and interpersonal skills, professionalism and teamwork for provision of quality care and maintaining the standards of medical education.

When it comes a super-specialty/subspecialty such as pediatric surgery, this concept of skill development is all the more necessary. Dealing with neonates and children who can't speak or cannot provide detailed and reliable account of their illness, and who do not always have the classical signs for appropriate diagnosis, skillful interaction with the parents, warm approach with love and compassion towards the suffering children and appropriate application of theoretical knowledge is extremely essential for optimum and efficient management. To maintain the quality and benchmark, education and training system needs upgrading rather than decreasing the standards and level of assessment of general and domain specific skills of the residency education.

As per the analysis done by Dr. Ashley D'Cruz [3], the specialty of Pediatric Surgery is not the stream of choice by most, which is in great contrast to 2 decades ago when pediatric surgery used to be most taken up specialty.

My recommendations for the upliftment of the specialty of pediatric surgery in India as well as globally, which are in tune to Prof. Ashley D'Cruz are as follows:

1. Set standards – in education, training and patient care.
2. Impart- knowledge of ethics and values along with the general skills as discussed above in the curriculum.
3. Mentor – the upcoming consultants and support them to achieve the highest standards of care with or without the use of simulators.

## References

1. "Skill." Wikipedia, the Free Encyclopedia. Wikipedia, the Free Encyclopedia. 2016.
2. [www.businessdictionary.com/definition/skill.html](http://www.businessdictionary.com/definition/skill.html)
3. D'Cruz AL. Pediatric surgery in India - The way forward. J Indian Assoc PediatrSurg. 2016; 21: 47-48.