

## ***Editorial Team***

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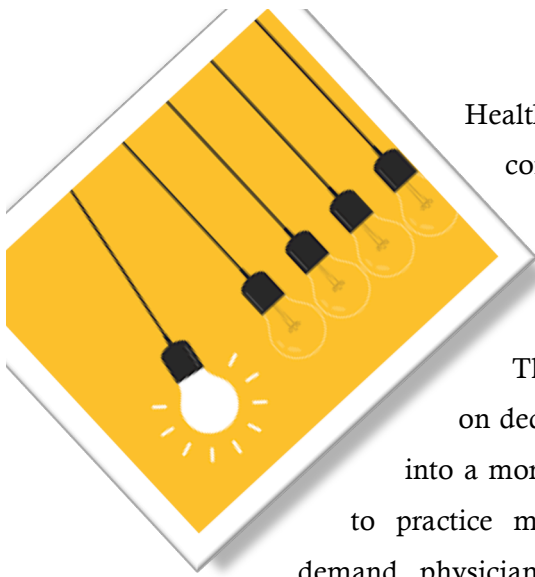
## **The need to promote physician leadership in health-care**

**Dr. Shaista Salman Guraya**

Given the complex nature of leadership, a standard definition of a leader remains elusive. However, there is a general consensus that leadership means influencing others to complete a particular task with shared decisions and with clear vision. Leaders drive teams with new perspectives and purpose-driven actions, while managers follow set agenda to complete a given task. Thus, leadership achieves new conventions by utilizing values, ideals, vision, symbols, and emotional exchanges. Winston and Patterson have rightly referred to leaders as those who select, equip, and influence one or more followers with skills and abilities. They empower followers to the organization's objectives causing the followers to enthusiastically perform in a concerted coordinated effort to achieve organizational objectives.



*In the medical sphere, majority of physician leaders emerge from their self-directed learning practice.*



Healthcare system is a complex integrated industry that has significantly transformed recently.

There is growing emphasis on dedicating clinicians' efforts into a more collaborative approach to practice medicine. These changes demand physician leaders to rely more

heavily on collaborative working climates. In the medical sphere, majority of physician leaders emerge from their self-directed learning practice.

In the medical sphere, majority of physician leaders emerge from their self-directed learning practice. Physicians are not trained, or socialized, to perform coherently in organizations. They are highly intelligent, independent, competitive individuals who identify very strongly with their professional role and reasonably strongly with their specialist orientation. Unfortunately, physicians in leadership roles clearly lack structured leadership training programs as they are self-learners. In addition to medical knowledge, physician leaders need formal coaching about finance, teamwork, time management, resolution of conflicts, commercial and industry entrepreneurship. Practicing framework of physician leaderships has shown a clear distinction between formally employed leadership such as medical directors and informal leadership from the voluntary and elected leaders.

Both types of leaders are essential ingredients in the effective functioning of healthcare institutions, but the characteristics of each category are distinctive.

The enigma of developing physician leadership is a challenge. Structured leadership training programs during undergraduate as well as postgraduate studies should be incorporated. Internal and external formal leadership faculty development programs, on-the-job training, socializing with other leaders, incentives and rewards can further enrich leadership skills of current physician leaders. However, a major challenge is to overcome the cultural differences between older physicians and younger physicians. Selection of the right person who is willing and not reluctant, who is aware of his strengths and weaknesses and ready to cope with pressure situations that are reflected by their actions and consequences will be the first step towards the development of physician leaders in healthcare organizations.

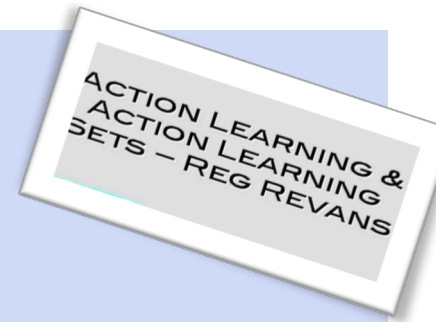
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## Action Learning in Higher Education

**Sara Shorbagi**  
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*'There is no learning without action and no (sober and deliberate) action without learning'* (Revans, 1998).<sup>1</sup>

Action Learning is a means of learning in which a small group of individuals meet to address real-time problems related to their own work place.<sup>2</sup>

The group is often referred to as an Action Learning Set (ALS). ALS members help each other to think deeply about their problems and issues; real learning develops when an action follows this thinking. Action Learning is based on a simple but powerful concept which implies that individuals learn best when they explore and reflect on their problems and issues. Through this reflection they learn to develop options followed by actions to deal with these problems and issues.<sup>2</sup> As Weinstein, K (1999) said Action Learning is *'a way of learning from our actions, and what happens to us and around us, by taking time to question, understand and reflect, so that we gain insight and consider how to act in the future'*.<sup>3</sup>

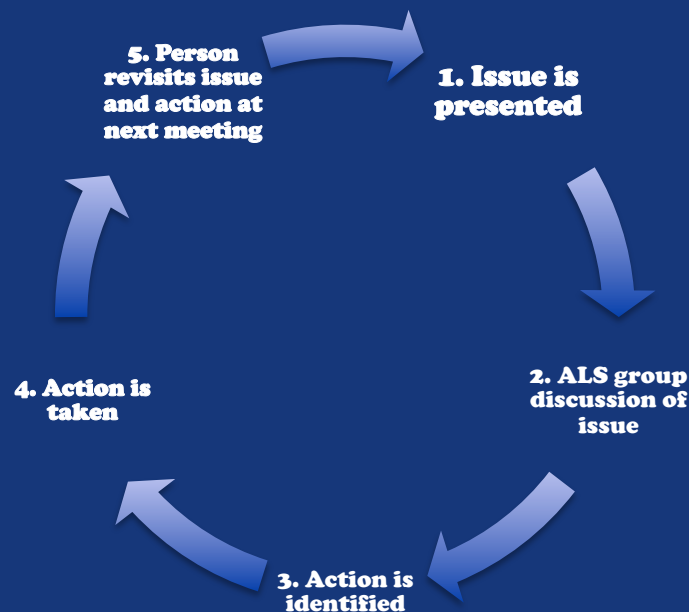
While action learning was originally developed by Professor Reg Revans in the 1940s to support changes in the organization, it has been utilized in higher education.<sup>2</sup> The trend towards student-centered learning, transferable skills (e.g. communication and leadership skills) and closer links with industry and services has left an impact in the educational sector. In addition, it has urged higher education institutes to explore means of linking the learner with the 'outside' world and introducing more effective methods of learning.<sup>2</sup> ALS provides a learning methodology for undergraduate and postgraduate levels that enhances a range of transferable skills for learners.<sup>2</sup>

### Benefits of Action Learning

- 1** Motivates learning, creativity and individual action.
- 2** Allows sharing of experiences.
- 3** Gives an opportunity for critical reflection and review.
- 4** Provides support during challenging situations.
- 5** Opens eye for new perspective thinking.
- 6** Helps resolve problems.
- 7** Assists in the follow-up of planned change.

## The process of the ALS and roles of group members<sup>(1,2)</sup>

The process of the ALS is depicted in figure 1. Each member of the ALS has an opportunity to present an issue or problem. This is followed by a group discussion focusing on the presented issue/problem. The presenter then identifies relevant action(s) to be taken. He/she will then implement or try to implement the proposed action. In the next meeting, each member revisits the issue, the action taken and any problems encountered. A similar ALS process starts again. Members of the ALS include the Facilitator and ALS members who take turns to be presenters. A facilitator's role is to supervise and ensure that the ALS is running smoothly. This includes reviewing task-related matters such as starting and finishing on time, maintaining a focused discussion and ensuring that people identify action and report back on actions taken. In addition, to the task-related aspects, facilitators also regulate the process and relationship aspects of the ALS. This is done by creating a safe environment, encouraging open disclosure, active listening, enforcing empathy between members, ensuring respect and appropriating balance between support and challenge.



**Figure 1: Process of the ALS<sup>1</sup>**

The presenter is the person presenting his/her issue or problem. After describing the issues, the role of the presenter is to clarify any inquiries raised by other ALS members and to propose actions he/she will take related to his own issue/problem. He /she will then convey possible actions taken in the subsequent ALS meeting.

The ALS members' role is to listen actively to what is said and to what is not said, to empathize, support, encourage and gently challenge the presenter using appropriate questioning. Members should certainly not arbitrate or enforce their views on the presenter or others within the ALS.

### **Standards of ALS (1,2)**

In order for an ALS to run efficiently, it is important that all members in the ALS appreciate and strictly comply with the following standards:

- ✓ Maintaining confidentiality of the issues discussed during the ALS.
- ✓ Encouraging one another to talk about their challenges, feelings and their need for assistance.
- ✓ Avoid imposing their own views or competing with each other in their questioning.
- ✓ Using open-ended questions, e.g. questions beginning with who, what, why, where, when and how, or such as "can you tell us more about...?".
- ✓ Listen carefully to each other's questions and, if beneficial, asking something that follows up from the previous train of questioning.
- ✓ Asking inquisitive questions that would help the presenter.

### **Challenges facing ALS members (1,2)**

ALS members often find a number of challenges such as, holding off on advice or solutions and using probing questioning to encourage presenter to identify possible solutions. This difficulty can be minimized through adequate training of ALS members and facilitators on effective questioning practices. Another challenge faced is maintaining the enthusiasm and commitment of members which tends to wax and wane through the course of time. There are several tips to overcome this challenge. For example, facilitators can ask group members about the Action Learning meetings and about recommendations and suggestions to make the meeting different. Furthermore, ALS members need to reflect on their own needs from time to time during the meetings; as Action Learning is most effective and relevant when it meets the people's needs.

### **Application of ALS in Higher Education**

ALS has been an essential complementary learning method in the Master of Leadership in Health Profession Education at the University of Sharjah since its launching in 2013. The action learning set is formed by a group of 4-5 master students who meet monthly during their second academic year. In each meeting, students discuss their research project which is an action research focused on an educational area related to their field.<sup>4</sup> ALS members help each other to think deeply and critically about their research project and any problems or issues raised. This in turn assists and supports them through their second year of their Master's program. The process is mentored by a facilitator.

#### **Conclusion**

**Action Learning is a simple but powerful learning method where a small group of individuals meet to address real-time problems related to their own work place. Action Learning can be implemented in higher education for undergraduate and postgraduate levels to enhance reflection and critical thinking as well as developing a range of transferable skills including communication and leadership skills.**

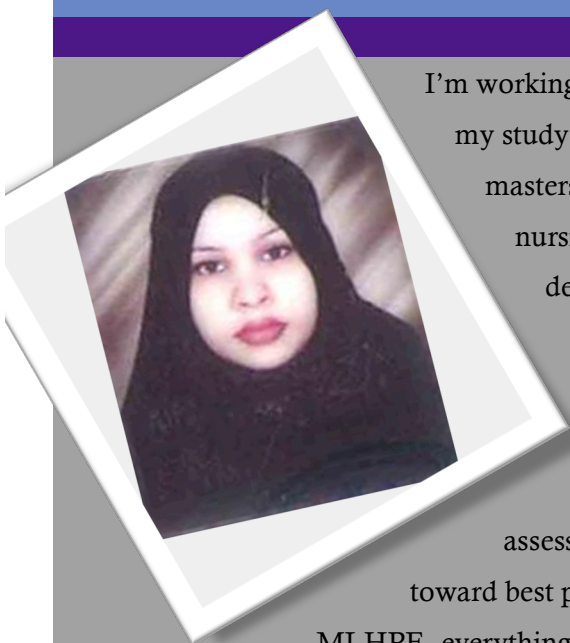


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## Testimonial by Master's Student

*Nursing Education Leader, Clinical Resource Nurse, Senior Charge Nurse – Umm Al Quwain Hospital –UAE*



I'm working as Nursing Education leader in my facility .When I decided to higher my study, I was navigating all masters programs available in UAE, specially masters of nursing .I was accepted in one of the universities to join master in nursing; but I'm working in nursing staff education, training and development, not anymore in bedside nursing so I needed to find something related to nursing education. Then I heard about the Master of Leadership in Health Professional Education (MLHPE). I found that expected outcomes suitable for me and fit my role. Before joining the program I was doing my best as an educator in supervising, assessment & evaluation, designing the training programs and leading nurses toward best practices in their workplace; but without guidance. When I joined

MLHPE, everything became clear and my work turned to an expert work based on the information I gained from the MLHPE. I didn't wait till graduation because I found a place for each piece of information delivered to me. It was a great opportunity and I was waiting each module to know new things which will help in improving my performance. I started mapping the educational programs prior conduction and understood the curriculum development for any training I designed, I started making exams for nurses competencies based on different assessment methods , my auditing of nurses workplace performance improved and I started using formative and summative assessments, I changed the way of nurses classes from traditional lecturing to case based learning and other small groups learnings and I supported the foundation of evidence based practice through leading journal clubs and inspiring nurses to learn about research activities. This all accomplishments were results of MLHPE. Each individual in my facility observed the change I introduced and enjoyed the interactive sessions during their learning.

The other aspect was the leadership, since I join nursing I was showing leader attributes; but again I was doing that depending on my own motivation and without scientific base of leadership. I tried my best and attended many trainings about leadership before joining MLHPE; but never any program linked the leadership with the education.

The MLHPE grasps my attention to many things such as types of leadership and its applications in a dynamic contexts, I understood the change drives and how to introduce any change in my facility. I'm hundred percent sure that I moved the nurses in my facility from tradition ways of nursing education to new phase smoothly and I didn't face any resistance because I was using what I learned carefully. I coached them and guide any nurse who need assistance to accept changes.

I really appreciate the opportunity I got in University of Sharjah by joining MLHPE. It fulfilled my expectations and I feel that whoever working in education should join this major.

Many thanks to His Highness SHK Sultan Bin Mohamed Al Qassimi because he facilitate our admissions to this great University. Another thanks to the tutors who helped us faithfully through the journey.



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