Author's response to reviews

Title: The Transition to Competency-Based Pediatric Training in the United Arab Emirates

Authors:

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Author's response to reviews: see over
Re: Revision of manuscript: The Transition to Competency-Based Pediatric Training in the United Arab Emirates

Dear BMC Medical Education Editors,

On behalf of my colleagues, I would like to thank you for your review of our manuscript entitled “The Transition to Competency-Based Pediatric Training in the United Arab Emirates.” The authors agree with the reviewers’ comments and feel that their suggestions have improved the quality of our manuscript. Reviewer comments and responses are listed below:

**Reviewer 1:**

**Comment:** “Discussion: One of the questions I had as I reflected on your data in Tables 1 and 2 is whether you were making other systems changes that could have influenced this as well. For example, was your transition to CBME also at a time when you were implementing a new focus on quality improvement, patient safety, systems efficiency, etc? It might be good to make a note of this where you discuss this data in the “Initial Outcomes in One Hospital” section.

**Response:** During this time period, there was no institutional effort focused on patient safety or quality improvement. However, the focus on several of the competencies, including systems-based practice and communication skills, no doubt contributed to the positive patient outcomes seen. Also, the authors are not suggesting a causal relationship between transition to CBME and the improved patient care outcomes. This is now explicitly stated in the text. The paragraph now reads: “Faculty and trainee focus on the competencies of professionalism, communication skills, practice-based learning and systems-based practice created an emphasis on patient safety and quality improvement...”
that likely contributed to the improved patient outcomes noted. Although it is not possible to prove causation between complex educational interventions and patient care outcomes in the real-world setting, the trends toward improvements in patient care coinciding with increases in the resident complement and service provided, are quite reassuring and do not suggest adverse unintended consequences for patients as a result of the CBME system. It is quite likely that our residents are providing better patient care. More importantly, the experience of providing better patient care as part of their medical training will undoubtedly have a positive impact on the care our residents will provide as future independent practitioners.”

Reviewer 2:

Minor essential revisions:

Comment: Initial Experiences at one hospital section, paragraph 2: line 170/table 1 - Is this statistically significant? If so, could you say significantly instead of substantially? Have you calculated the statistical significance of the change? Should the limitations mentioned below the table be mentioned here as well?

Response: The word “substantially” has been changed to “significantly.” P values were added to Table 1. The limitations mentioned below the table were not repeated in the text. However, the following statement is included: “Although it is not possible to prove causation between complex educational interventions and patient care outcomes in the real-world setting, the trends toward improvements in patient care coinciding with increases in the resident complement and service provided, are quite reassuring and do not suggest adverse unintended consequences for patients as a result of the CBME system.” Also, the text explicitly states “the number of reported clinically significant adverse events in the Department of Pediatrics decreased significantly.”

Summary Paragraph:

Comment: The summary sounds like purely a reflection, rather than a summary of findings, reflection and next steps. It needs some commentary on the "success" of the program, the impact it has had, then followed by the goals/next steps that are stated here. Also, this section could use some better transitions. It sounds too much like several serialized and disconnected thoughts.
Response: The authors agree with the reviewer. The summary paragraph has been edited as follows: “The goal of graduate medical education is to develop competent physicians who can meet the public’s healthcare needs. With changes in technology, economics and population demographics, society’s needs are continuously changing. Accordingly, medical education must continually evolve. Over the past few years, Pediatrics training programs in Abu Dhabi have embraced competency-based medical education in an effort to provide better healthcare for UAE children and their families. All Pediatric residency programs in Abu Dhabi have recently received accreditation by the Accreditation Council for Graduate Medical Education- International (ACGME-I). Early outcome data from the largest Pediatric program in Abu Dhabi are positive in terms of both educational and patient care outcomes. Longitudinal and multi-institutional data are needed. Also, substantial funding is necessary to sustain high quality medical education. Long term sustainability and generalizability to other emerging healthcare systems will require better strategies for funding and innovative ways to improve education without escalating costs. Finally, it has been acknowledged that functional and competent healthcare systems are necessary for the training of competent physicians [20]. It is, thereby, critical that the graduates of our residency programs contribute to the competency and quality of the UAE healthcare and educational system.”

Comment: line 189 - There needs to be some expansion or clarification of this statement about self-reflection.

Response: This statement has been removed from the text.

Discretionary Revisions:

Comment: Abstract Summary Paragraph - Some brief clarification of how CBME aligns GME with population healthcare needs would be helpful, otherwise I find this statement confusing.

Response: To avoid confusion, the statement “because it aligns graduate medical education with population healthcare needs” has been removed from the abstract. The concept is explained in more detail in the background section (please see below response).

Comment: Background, 1st paragraph: line 38-39- same comment as in abstract, it is not obvious to the reader what the alignment is between CBME and GME, and it would be helpful to briefly clarify it here.
Response: The statement has been changed to “Although academic scholars continue to debate over the educational and clinical outcomes of competency-based education, it has become the worldwide standard for postgraduate training of physicians. By aligning the requisite competencies desired in health professional trainees with each country’s health care priorities, competency-based training directly integrates graduate medical education (GME) with the health and healthcare needs of populations.”

"Minor issues not for publication":

Background, 1st paragraph:

Comment: line 29 -- recommend "responded" rather than "replied".

Response: Correction made as suggested by reviewer.

Comment: line 32 - recommend deleting "For example", and starting the sentence with "The CanMeds model..."

Response: Correction made as suggested by reviewer.

Initial Experiences at one hospital section, paragraph 1:

Comment: lines 145-146 - recommend minor change to "...we will provide as a case study the impact of this reform on the oldest and largest..."

Response: Correction made as suggested by reviewer.

Comment: line 148 - "exams" should be "examinations"

Response: Correction made as suggested by reviewer.

Comment: line 153 – remove comma after season

Response: Correction made as suggested by reviewer.
Background, 2nd paragraph:

Comment: line 51 - This statement could use a little explanation as to why this is particularly important in developing countries.

Response: The sentence has been changed to: “These benefits are particularly important in countries with developing healthcare systems, who are actively building a health professional workforce.”

Initial Experiences at one hospital section, paragraph 2:

Comment: lines 161-162 - recommend minor change to "Additionally, in mid-2009 Tawam implemented..."

Response: Correction made as suggested by reviewer.

Comment: line 168 - recommend delete second "increases" in sentence (it is unnecessary)

Response: Correction made as suggested by reviewer.

Comment: line 169 - a "the number of" reported clinically significant...

Response: Correction made as suggested by reviewer.

Comment: line 176 - after better patient care recommend adding "as a result of the CBME system."

Response: Correction made as suggested by reviewer.

Comment: lines 176-178 - recommend changing this sentence to "More importantly, the experience of providing better patient care as part of their medical training, will undoubtedly have a positive impact on the care our residents will provide as future independent practitioners."

Response: Correction made as suggested by reviewer.
Response: Correction made as suggested by reviewer.

Thank you in advance for your consideration of our manuscript.

Sincerely,

Halah Ibrahim MD MEHP