

## ATCOM module

Chinmay Shah

Associate Professor, Dept. of Physiology, Govt. Medical College, Bhavnagar, Gujarat

Email: cjshah79@yahoo.co.in

World Health Organization (WHO) has defined five attributes for a physician: a caregiver who assesses and improves the quality of care, who makes optimal use of new technologies, who promotes healthy lifestyles, who reconciles individual and community health requirements and who is able to work efficiently in team.<sup>(1)</sup>

Physicians are expected to act in a respectful, courteous and civil manner towards their patients, colleagues and others involved in the provision of health care. Doing so fosters an atmosphere of trust, shared accountability and collaboration,<sup>(2)</sup> and is an essential component to upholding the values and principles of medical professionalism. Conversely, behaviour that is unprofessional and/or disruptive undermines medical professionalism and the trust of the public. Literature shows that these behaviours can negatively impact both the delivery of quality health care, and patient safety and outcomes by eroding the effective communication and collaboration that underpin good medical practice.<sup>(3,4,5)</sup>

In 1969, it was first claimed that doctor-patient communication is a teachable skill.<sup>(6)</sup> A study by Rees and Sheard showed that the attitude of medical students towards communication skills training was significantly associated with a number of demographic and education-related characteristics.<sup>(7)</sup>

The overall goal of undergraduate medical education programme as envisaged in the revised Regulations on Graduate Medical Education - 2012 (GMR 2012) is to create an Indian Medical Graduate (IMG) possessing requisite knowledge, skills, attitudes, values and responsiveness, so that he or she may function appropriately and effectively as a physician of first contact of the community while being globally relevant. The ATCOM module has been prepared as a guide to facilitate institutions and faculty in implementing a longitudinal program that will help students acquire necessary competence in the attitudinal and communication domains.<sup>(8)</sup>

The ATCOM module (Attitude and Communication module) has been designed by Medical Council of India, to facilitate institutions and faculty for this splendid task. It indeed is a guide to the institutions and the faculty in implementing a longitudinal program cascading down all the four years that will help students acquire necessary competencies. It offers a framework and flexible approaches to teaching-learning activities. The suggested activities would require 139 hours spread over the four years of the course. In the first year it is suggested to use a minimum of 34 hours. The module

has specified the competencies with regards to attitude, communication, and ethics needed to be taught in each year of the medical course, namely foundation of communication in the First year, bioethics in the Second year, medico-legal issues, ethics, and doctor-patient relationship in the third year, and medical negligence and dealing with death in the final year are some of the important topics. Thus, wholehearted effort has been given to address the "heart" of the medical graduates.

There is no denying of the fact that, when appropriate attitudes, communication and ethical strategies are applied, there is enhancement of learning of the core subjects as well. Therefore it is necessary to start active teaching and learning of the basics of good communication skills, the correct attitude and the awareness of what is a correct conduct and what is a wrong conduct right from the very first year of the course.

Role modeling and mentoring associated with classical approach to professional apprenticeship has long been a powerful tool. This approach alone is no longer sufficient for the development of a medical professional. The domains of attitude, communication and ethics therefore need to be taught directly and explicitly throughout the undergraduate curriculum. Thus, ATCOM if implemented effectively will cover two major aspects of teaching professionalism including explicit teaching of cognitive base and also stage appropriate opportunities for experiential learning and reflection throughout the curriculum.

It is hoped that the successful implementation of the ATCOM modules will be forerunner of the transition to competency based medical education program envisaged by the Medical Council of India.

### References

1. Rennie SC, Rudland JR. Differences in medical students' attitudes to academic misconduct and reported behaviour across the years—a questionnaire study. *J Med Ethics* 2003;29:97-102.
2. Shapiro, J., Whittemore, A., Tsen, L.C. Instituting a culture of professionalism: the establishment of a center for professionalism and peer support. *Joint Commission Journal on Quality and Patient Safety*. 2014;40(4),168-177.
3. Leape, L.L., Shore, M.F., Dienstag, J.L. et. al. (2012). Perspective: a culture of respect, part 1: the nature and causes of disrespectful behavior by physicians. *Academic Medicine*. 2012;87(7),845-852.
4. Sanchez, L.T. Disruptive behaviors among physicians. *Journal of the American Medical Association*. 2014;312(21), 2209-2210.

5. Leape, L.L. & Fromson, J.A. Problem doctors: is there a system-level solution? *Annals of Internal Medicine*. 2006;144(2),107-115.
6. Morgan WL, Engel GL. *The clinical approach to the patient*. Philadelphia: WB Saunders. 1969.
7. Rees C, Sheard C. The relationship between medical students' attitudes towards communication skills learning and their demographic and education-related characteristics. *Medical Education* 2002;36:1017–27.
8. Attitudinal and Communication (ATCOM) Competencies for the Indian Medical Graduate, Preamble / Concept, Appendix 2: Communication skills to rating tool, Last accessed on 10.01.2017. <http://mcircvizag.blogspot.in/2016/01/atcom-new-mci-attitudes-communications.html>.