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CLINICAL EDUCATION EVALUATION PROGRAM IN FK UKI

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Research paper

Keywords:

program evaluation, CIPP Models (Context, input, process, And Product)

Abstract:

Background
To obtain data information of the Educational Program Evaluation Clinic at FK UKI which is useful to know the extent to which the objectives of the clinical education program is achieved by knowing the effectiveness of each component and the results of research on each of these components can be used as well as consideration for decision makers.

Material and methods
The CIPP evaluation model, which evaluates the educational program with four components (context, input, process, product) through the process of getting the data through interviews, questionnaires, the study of documents and observation, then collect and tabulate the data presented qualitatively and quantitatively, reprocessed and analyzed using statistical methods/computer (SPSS).

Results
The evaluation of clinical education programs in FK UKI on almost all components run in accordance with the objectives of the educational programs, but there are still weaknesses in the input component that some academic staff do not have the second-degree master education.

Conclusions
The evaluation of clinical education programs in FK UKI on almost all components run in accordance with the objectives of the educational programs, but there are still weaknesses in the input component that some academic staff do not have the second-degree master education.

CLINICAL EDUCATION EVALUATION PROGRAM IN FK UKI

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Abstract: The purpose of this research was to obtain data information of the Educational Program Evaluation Clinic at FK UKI which is useful to know the extent to which the objectives of the clinical education program is achieved by knowing the effectiveness of each component and the results of research on each of these components can be used as well as consideration for decision makers. The method that was used in this research is the CIPP evaluation model, which evaluates the educational program with four components (context, input, process, product) through the process of getting the data through interviews, questionnaires, the study of documents and observation, then collect and tabulate the data presented qualitatively and quantitatively, reprocessed and analyzed using statistical methods/computer (SPSS). The results of this study lead to the conclusion that the evaluation of clinical education programs in FK UKI on almost all components run in accordance with the objectives of the educational programs, but there are still weaknesses in the input component that some academic staff do not have the second-degree master education.

Key Words: Program Evaluation, CIPP Models (Context, Input, Process, And Product)

INTRODUCTION

Clinical education at the professional level is a phase that medical students must go through to become a doctor. Clinical education is also very instrumental in building students' ability to solve real clinical problems and make the right decisions to solve these problems.

At this stage, students are faced with the real situation that they will face daily as a doctor. In the previous stages of education, students have indeed gained many theories, knowledge, and skills. However, the knowledge gained in class will not be well understood or applicable before they face real life situations that require analysis, evaluation, modification, and application processes.

In the clinic, students need time to process and understand their experience based on prior knowledge and personal experience. In this case, the role of counselor is needed. Counselors at the clinic are expected to bridge students so that they can connect the theories they get during undergraduate studies with actual clinical practice and therefore facilitating the clinical education process which is very important for the students' learning process. The most important thing in clinical education is the

process of strengthening the relationship between experience in the clinic and the theory gained in the classroom.

Clinical Education is a Medical Education Program. The program is an activity or activities designed to implement the policy and will be carried out for an unlimited time. This policy is quite general and to realize this policy, certain programs have to be arranged. All programs need to be evaluated to determine whether the service or intervention has reached the stated goals. Stufflebeam states that evaluation appropriately promotes and assists goals and ongoing improvement. In line with this opinion, Madaus stated that evaluation carried out in service will result in improvement. As an effort to improve a program, the results of the evaluation will be very useful as feedback for the leaders and implementing staff of a program.

One example of the program evaluation models is the CIPP model developed by Stufflebeam, et al. (1967) at Ohio State University. This model is very suitable for evaluating the Clinical Education Program. The reason is that the type of program is the Processing Program, where the target object is evaluated in the process and input to results, namely from medical students (Input) processed in Clinical Education to become doctors who will be competent in the medical profession (product). From the results of the program evaluation, the decision makers will determine the follow-up of the program that is or has been implemented.

The Faculty of Medicine of the Indonesian Christian University (FK UKI) as the first private medical faculty in Indonesia is currently implementing a clinical education program. In addition FK UKI is a medical education institution that has its own practice hospital.

Medical education institutions in clinical education programs must evaluate the implementation of educational curricula, institutional programs, organizational variables, and policies which are also evaluations of the components of the context, with careful and rigorous checks. This is in accordance with the opinion of Walberg and Haertel in Judith, namely that Evaluation is an activity that requires caution, rigorous examination of the education curriculum, institutional programs, organizational variables, or policies.

Evaluation of the quality of the academic community includes staff, lecturers, curriculum, students, and means of evaluating the input component. According to Farell, an evaluation is an action used to assess the value or price of a program. So the quality of the input component is related to student learning outcomes or performance

appraisal, Education Level from Staff and Lecturers, curriculum that has medical education standards in Indonesia and supporting facilities provided by medical education institutions, in other words, the purpose of input evaluation is the initial ability of students and medical education institutions (Indonesian Christian University) to support or encourage the Clinical Learning Education Program. This is also consistent with Stufflebeam's opinion that the questions which are in favor of input lead to solving problems that encourage the implementation of the program concerned.

Evaluation of the teaching and learning process, evaluation of student progress, and evaluation of supporting facilities are an evaluation of the process components that are directed to assess how far the activities carried out in the program have been executed in accordance to the plan.

Evaluation of the results component is directed at things that show changes that occur in raw input in the example of students who received learning in the clinical education. Evaluation results are analyzed and used as feedback for leaders of medical education institutions, academic staff, students, other support staff for planning, developing and improving the overall education curriculum and program

Through the elaboration of the background and focus of the problem that includes the Four Components above, the formulation of the problem can be explained with emphasis to the effectiveness of each component, namely whether FK UKI has conducted an evaluation of the four components.

The usefulness of research on the evaluation of clinical education programs in the Faculty of Medicine of the Indonesian Christian University (FK UKI) is generally useful as one of the informational materials for policy makers / decision makers in order to improve programs / policies.

The purpose of this study is to obtain data information from an evaluation of clinical education programs in FK UKI which is useful to find out the extent to which the objectives of the clinical education program are achieved by knowing the effectiveness of each component and the results of research on each of these components can be used as consideration for decision makers.

METHODS

Research on evaluation of the Clinical Registrar program at FK UKI in the Faculty of Medicine, Indonesian Christian University using the CIPP evaluation

model that evaluates the Clinical Education Program based on the components of a program's process, namely Context Evaluation (Context), Input (Input), Process (Process), and Results (Product)

In the context component of this study will examine the needs, problems, and opportunities to help policy makers in defining goals, priorities and results, including the rational application of the program and describe the needs of user agencies to the implementation of the clerical education program (clinic) in FK UKI. Rational implementation of the program is the result of an analysis of the basic policy of the implementation of the clerical education program (clinic) in FK UKI. This is related to the opportunity to use the implementation of the clerical education program (clinic) in FK UKI whether it is still relevant to continue to be implemented.

In the input / input component this study will examine alternative approaches and plan activities that are efficient in meeting the needs and objectives to be achieved. The input component includes the foundation of institutions, curricula, students, educators, learning packages, education personnel, educational facilities, and budgets.

In order to obtain data, researchers must arrange the instrument lattice in advance. The grid developed using 9 areas of the Professional Doctoral Education Standards based on the Indonesian Medical Council with a grouping of CIPP models:
Context Evaluation: (1) government policy; (2) FK-UKI Policies; Vision, Mission and Objectives; (4) Academic Autonomy, the source of the data can be from the Dean, Pudek I, Head of Professional Section, Director of FK UKI, Archives / Documents, with interview instruments.
Input Evaluation: (1) Students; (2) Clinical Education Supervisors; (3) Facilities and Infrastructure; (4) curriculum; (5) Clinical Education Resources; (6) Organizing clinical education programs and administration, data sources can be from the Head of the professional program, Documents, Pudek 2, Archives / Documents, Section Heads, Kodik Section and Secretary of Clinical Education Section (11 Parts), with interview instruments.
Product Evaluation: (1) Graduates; (2) Continuous renewal, sources can be obtained from the Dean Documentation, with interview instruments.

The research instrument is a tool used to measure or obtain information about variable characteristics inherent in the observation unit or research subject in a systematic and objective manner. (Hadjar, 1999, p. 14).

In this study, to explore data, the instruments used were questionnaires both tests and non-tests and interview guidelines.

Questionnaire validity used in this research instrument is validity that is logical or also called construction validity. Logical validity is the validity that is assessed from every aspect that will be disclosed in advance the definition as a measure of whether this material is really included in it. Therefore, if the aspect of the data collection tool is considered to have accommodated all the symptoms included in certain definitions, it means that the data collection tool is quite valid. (Hadari, 1995, p. 137).

While the interview uses the method of interviewing is not free or guided (guiden interview), namely the use of interviews by making the main questions only as a guideline for questions. (Supardi, 2005, p. 121).

Collection of data taken from various data sources used in this study can be grouped into four groups of data sources, namely: (1) Informants or resource persons, including Experts, Tutors, all UKI Medical Faculty students; (2) Events or activities, namely in the form of learning activities carried out by tutors, experts and students; (3) Place or location, namely in the form of the translation of the place of implementation of learning. In addition, the place as a data source will produce data that describes the physical quality / class environment; (4) Archives and documents, which include the profile of the problem-based learning program at the Faculty of Medicine, Indonesian Christian University.

To obtain data from the data sources above, the data collection process is carried out. Data collection in this study was carried out using these methods, including: (1) Dissemination of instruments (test and non-test), namely data collection with instruments in the form of a number of questions arranged to capture the information held by respondents, either in the form of opinions, facts or attitudes; (2) The interview is collecting data with instruments in the form of a number of questions submitted orally by the interviewer to the respondent and the question is answered orally as well; (3) Study of documents, namely data collection by studying supporting documents for program implementation, and (4) Observation, namely data collection by observing all processes, people and objects that affect the implementation of the program.

The implementation of data analysis techniques begins after the data is available through interviews, questionnaires, document studies and observations. The

next activity describes the results of interviews, questionnaires, document studies and observations as well as observing questionnaire data on each respondent's answers to be examined for completeness and truth in filling out the instrument.

The data collected will be tabulated and presented qualitatively and quantitatively. After the quantitative data is tabulated, data analysis is carried out with Data Processing.

Data Processing / Data Analysis uses the Statistical Method, which is divided into two groups, namely descriptive statistics and inferential statistics (parametric statistics) with methods such as T-test (t), Product Moment Correlation (r). Finally, quantitative data processing was carried out with the SPSS computer program (Statistical Package for the Social Sciences).

The data that is concluded will be information as a material consideration of decision making for program improvement.

RESULTS

The purpose of this study is to obtain data information from an evaluation of clinical education programs in FK UKI which is useful to find out the extent to which the objectives of the clinical education program are achieved by knowing the effectiveness of each component and the results of research on each of these components can be used as consideration for decision makers.

Context evaluation

Government policy; FK-UKI Policy; Vision, Mission and Objectives; and Academic Autonomy produce data / facts from the evaluation in the form of RI Law No. 20, 2003 concerning National Education System and No. 29, 2003 concerning the practice of doctors and their implementation, physician competency standards, Indonesian medical council regulation No. 10, 2012 concerning Indonesian medical profession standards , academic guide book, conformity with KKI and community needs, source data from study documents and interviews with leaders / administrators, with criteria producing results that are useful for decisions, namely data / facts of evaluation results to guide in compiling an Academic Guidebook and also obtained Recommendation, namely To the Leader / Dean of FK UKI to make a guidebook in accordance with BAN PT and KKI and see EMI (internal quality evaluation) periodic activities.

The results of the study conclude that Evaluation of the Clinical Education Program at the Faculty of Medicine of the Indonesian Christian University in the Context component, in the Policy aspect of the clinical education program at the college level (Faculty) has been effective.

Input Evaluation

Students, Facilities and Infrastructure, Curriculum, Clinical Education Resources, and the implementation of clinical education programs and administration have been effective in accordance with the Republic of Indonesia Law No. 20 of 2003 concerning National Education System and Law No. RI. 29 of 2004 concerning Medical Practice as well as its implementing regulations and Indonesian Medical Council Regulation No. 10 of 2012 concerning the Standards for the Education of Indonesian Doctors. (2009), except for the requirement to become a clinical adviser, namely that not all academic staff / assistants / clinical counselors have a S2 qualification and have a rank of Lector and above because the academic staff has long experience in the clinic and has been provided with a seminar seminars and short courses on things that are part of it, so that it is considered to have sufficient ability to guide students in learning in the clinic. From the results of the Program Evaluation, this component produces decisions and recommendations.

Process Evaluation

Clinical Education Planning with standard design criteria, data / facts from the evaluation of interviews and working meeting documents, the decision is that Planning is developed based on applicable standards and rules Syllabus is developed based on needs and based on KKI, recommendations mandate the Dean of FK UKI to pay attention to the Clinical Education Procedures permanent, with the expectation that the graduation can be ready to excel in planning for the next 5 years; Implementation of Clinical Education, criteria for fulfilling the requirements for the implementation of the learning process, data / facts from the evaluation results of the interview of the Dean and Head of the Professional Department the decision of students and supervisors to carry out clinical education in accordance with established procedures

Clinical Education Evaluation, Assessment criteria for clinical education learning process, data / facts of Interview results and Log book, decision of clinical learning process assessment and the results are carried out in accordance with procedure; Supervision and monitoring, criteria for supervision of clinical education

activities by deans and directors, data / facts Interview results held at the annual meeting, decisions at the final stage of clinical education carried out by students by all lecturers in the clinic and by the leadership. The shortcomings and barriers that arises during clinical education will be discussed at a joint meeting between the supervisor and the leadership.

So clinical education planning, implementation of clinical education, evaluation of clinical education and supervision and monitoring have been effective in accordance with the criteria specified in the process evaluation component. But there are also drawbacks that not every disease listed in the student logbook is present in each round. To meet these shortcomings, students will be referred to affiliate hospitals or network hospitals if there are cases of diseases that are not in the logbook.

Product Evaluation Results

Aspects of graduates with criteria Graduates are doctors who meet the competency standards approved by the Indonesian Medical Council (in accordance with article 8 of the Republic of Indonesia Law No. 29 of 2004 concerning Medical Practices), namely the Standards of Doctor Competence, data / facts from the evaluation of documentation, decisions of students who was declared graduated in clinical education, expected to become a doctor who has the competency that was aspired by KKI, the recommendation is that graduates are ready to compete because of paying attention to the formulation of BAN PI and KKI.

Based on the results of the document review found the results of product evaluation in this study the Faculty of Medicine, Indonesian Christian University has produced 3,909 graduates spread across the country.

Aspects of continuous renewal, with criteria for sustainability of renewal after activities, data / facts of results Interviews and documents, decisions on the results of evaluations conducted when students conduct clinical education, constraints and obstacles faced by students can be solved and don't repeat.

DISCUSSION

Hypothesis testing of quantitative research is by evaluating the context, input, process, product conclusions as follows: Program Evaluation in the Faculty of Medicine, Indonesian Christian University in the context, input, and process

components (CIPP) in all aspects at the college level (Faculty) has been in accordance with the criteria of the clinical education program, but there are some weaknesses in the input component in the qualifications of academic staff that need to be improved, namely those that are not equivalent to Strata 2 (S2). Students, educators, alumni and study documents that there is evidence of graduates and continuous renewal carried out by the Faculty of Medicine of the Indonesian Christian University produce doctors who have practical competence, mastery of attitude competencies, and are given a degree as a general practitioner.

Summary of the research results above, in accordance with the principles of Education Program Evaluation, namely, comprehensive, comparative, continuous, objective, based on valid, functional and diagnostic criteria.

CONCLUSION

The clerical education program (clinic) at the Indonesian Christian University Medical Faculty has been effective according to the rules of the Indonesian Medical Council (KKI). The Faculty of Medicine, Indonesian Christian University together with the Main Education Hospital, the Hospital of affiliated education and the network education hospital that has been a partner of Indonesian Christian University in carrying out clerical education (clinics) has carried out a clinical education program according to the rules and procedures the one agreed upon and set together.

The policy of the clerical education program (clinic) in the Faculty of Medicine of the Indonesian Christian University, has been effective according to the Republic of Indonesia Law No. 20 of 2003 concerning National Education System; RI Law No. 29 of 2004 concerning Medical Practices and their implementing regulations; Doctor Competency Standards; Indonesian Medical Council Regulation No. 10 of 2012 concerning the Standards of Education of Indonesian Medical Professionals. With a Vision: To make the Faculty of Excellence and Competitive Medicine in a global era based on Christian values, and MISSION: To produce doctors who can perform primary health services based on Christian values; Produce doctors who excel in traumatology and tropical diseases; Produce doctors who are able to research and carry out continuous community service.

The program design consists of: Students in clinical education, physician training in clinical education, Facilities and Infrastructure, curriculum, Clinical Education Resources and the implementation of clinical education programs and

administration runs effectively and meets the criteria in the Republic of Indonesia Law No. 20 of 2003 concerning National Education System and Law No. RI. 29 of 2004 concerning Medical Practice as well as its implementing regulations and Indonesian Medical Council Regulation No. 10 of 2012 concerning the Standards for the Education of Indonesian Doctors. Weaknesses found by researchers that not all academic staff / assistants / clinical advisers have a S2 qualification and have the rank of Lector above. Academic staff / assistants / clinical counselors even though they do not have a S2 qualification but have considerable experience in the clinic and have been provided with participation in seminars and short courses on matters that are part of it. This weakness can also be used as a consideration for improvement and decision makers in future program design.

The implementation of clinical education programs at the Faculty of Medicine of the Indonesian Christian University has been effective and provides a learning experience to medical students with reference to graduate competencies. All learning processes are written in the rules of study rules, referring to the activity schedule, syllabus, and planned learning process according to the plan and there is program supervision and when the learning evaluation is carried out and there is a program evaluation monitoring system. Weaknesses in the learning process are not all diseases or cases in the student logbook list that are encountered during clinical education. This is a challenge for clinical counselors, such as how to make students get the expected competence even though there are cases in the list of cases in the log book that students do not encounter in clinical learning.

Based on the findings there are several things that need attention, the researchers gave suggestions based on research results of evaluation of clinical clerical education programs at the Faculty of Medicine, Indonesian Christian University, as follows:

1. To the development policy makers, organizing in order to improve the quality of the clerical education program (clinic) at the Faculty of Medicine, Indonesian Christian University, that the clinical education program (clinic) in the Faculty of Medicine of the Christian University of Indonesia can be continued and improved by paying attention to the weaknesses found by researchers. By increasing the responsibility and competence of clinical counselors to improve the competence of students of the clerical education program (clinics) in the Faculty of Medicine, Indonesian Christian University.

2. For the leaders of the Indonesian Christian University Medical Faculty and the Director of the Main Education Hospital, affiliated Education Hospital, and network education hospital. The evaluation results are expected to be a reference for establishing policies on the development of clinical clerical education programs at the Faculty of Medicine, Indonesian Christian University. The policy made greatly influences the implementation of clerical education (clinics) at the Faculty of Medicine of the Indonesian Christian University with an effective, efficient implementation mechanism, using human resources, available funds, available resources.

REFERENCES

Arikunto, Suharsimi dan Cepi Safrudin Abdul Jabar, 2004, *Evaluasi Program Pendidikan Pedoman Teoritis Praktis Bagi Praktisi Pendidikan*, Jakarta: Bumi Aksara.

Edison, 2009, *Penelitian dan Evaluasi Dalam Bidang Pendidikan*: Evaluasi CIPP; http://ed150n5.blogspot.com/2009/04/evaluasi-cipp.html (dikses 03 Januari 2014)

Evaluasi Program Sekolah. Departemen Pendidikan Nasional Universitas Negeri Yogyakarta, 2009.

Guba, Egon G. and Yvonna S. Lincoln, 1983, *Effective Evaluation, Improving the usefulness of Evaluation Results Through Responsive and Naturalistic Approaches*. San Francisco: Jossey Bass Publisher.

Hadari, Nawawi, *Metode Penelitian Bidang Sosial*, 1995, Yogyakarta: Gadjah Mada University.

Hadjar, 1999, *Dasar-dasar Metodelogi Penelitian Kuantitatif dalam Pendidikan*.Jakarta: Raja Grafindo Persada.

http://fk.uki.ac.id/index.php?option=com_content&view=article&id=13&Itemid=82, di unduh pada Februari 2013

http://id.wikipedia.org/wiki/Kedokteran, diunduh 02 Agustus 2012

http://simak.ui.ac.id/profil-prodi/pascasarjana/ilmu-kesehatan/ilmu-pendidikan-kedokteran, diunduh 2 Agustus 2012

http://ed150n5.blogspot.com/2009/04/evaluasi-cipp.html

Kahan, Barbara dan Kael Consulting. 2008, *Review of Evaluation Frameworks*. Saskatchewan Ministry of Education.

KONSIL KEDOKTERAN INDONESIA Indonesian Medical Council, *Standar Pendidikan Profesi Dokter*, Jakarta 2006.

Kurikulum dan Silabi Fakultas Kedokteran Universitas Kristen Indonesia, Fakultas Kedokteran Universitas Kristen Indonesia, Jakarta, 2008.

Madaus, George F., Michael S. Scriven, and Daniel L. Stufflebeam, 1985, *Evaluation Model, Viewpoints on Educational and Human Services Evaluation,*. Boston: Kluwer Nijhoff Publishing.

Mark, Melvin M. dan Debra J.Rog, 2010, *The 2010 User-Friendly Handbook for Project Evaluation*. Program Officer and COTR Division of Research and Learning in Formal and Informal Settings National Science Foundation.

Supardi. 2005, *Metode Penelitian Ekonomi dan Bisnis*. Yogyakarta: UII Press.

Tayibnapis, Farida Y. 2008, *Evaluasi Program dan Instrumen Evaluasi,* Jakarta: PT Rineka Cipta.

Wilde, Judith PhD dan Suzanne Sockey, PhD, 1995, *Evaluation Hanbook*. Evaluation Assistance Center-Western Region.

Wirawan, 2011, *Evaluasi: Teori, Model, Standar, Aplikasi dan Profesi*. Jakarta: Rajawali Press.

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