Journal of Clinical and Nursing Research

Research Article



Research on the Quality Management of Apprenticeship Education at "Famous Senior TCM Physician Studio"

Nana Yan, Hongxing Zhang, Cong Tan*

Dezhou Zhang Hongxing Famous Senior TCM Physician Heritage Studio, Dezhou Hospital of Traditional Chinese Medicine, Dezhou 253000, Shandong Pvince, China

Abstract: "Inherited the traditional education" is the main mode of talent cultivation of traditional Chinese medicine and effective way, in order to better promote the heritage and development of TCM cause, let "famous old Chinese medicine studio" play in training talents, academic communication, scientific research, service people should have a role to promote the region's traditional Chinese medicine clinical ability, our college of traditional Chinese medicine (TCM) based on a studio conducted to old with the new educational background education, the author use the PDCA circulation method in management of "famous old Chinese medicine studio" education "shicheng" quality management is improved and exploring, significantly improved the team of teachers and students both sides of teaching and learning satisfaction, At the same time, it has effectively promoted the overall level of TCM medical treatment in our hospital.

Keywords: TCM apprenticeship education; PDCA cycle method; Quality management

Publication date: November, 2020
Publication online: 30 November, 2020
*Corresponding author: Cong Tan, weini_129@163.
com

1 Introduction

Since ancient times, the path to success in traditional Chinese medicine (TCM) in the past has been based on the "apprenticeship education" system of "mentor guiding apprentices". Traditional "apprenticeship education" is the main mode and effective way of training TCM talents. Article 35 of the "Traditional Chinese Medicine Law of the People's Republic of China" that was implemented by the state in 2017 stipulates that: the state develops TCM apprenticeship education, and encourages experienced TCM physicians and TCM professional and technical personnel to lead apprenticeships"^[1]. This law provided a legal basis for the "apprenticeship education" in TCM. The TCM specialty of Dezhou Hospital of Traditional Chinese Medicine is a provincial-level key specialty, and it shoulders the mission of passing on TCM heritage and training TCM talents. In order to better promote the inheritance and development of TCM and let the "Famous Senior TCM Physician Studios" play their due role in nurturing talents, academic exchanges, scientific research, and serving the public to further enhance the clinical capacity of TCM in the region, the author uses the PDCA cycle method in management to improve and explore the quality management of "apprenticeship education" of the "Famous Senior TCM Physician Studios". Now I will give a brief introduction, hoping to make a modest contribution to the development of the TCM "apprenticeship education".

2 Methods

The PDCA cycle, also known as the "Deming Cycle", was proposed by American quality management expert Deming. Because of its nature of finding and solving problems, it is often used as a basic method of quality management in various work in the medical and nursing fields. Using the PDCA cycle to discover, solve, deal with and obtain feedback on the quality management of "apprenticeship education" quality management, the management at each stage can be refined, making the entire plan clear and be implemented steadily, having good application value. The PDCA cycle is divided into 4 stages and 8 steps.

2.1 Planning Stage

There are 4 steps at this stage. The first step is to analyze the current problems in "apprenticeship education" and find the causes or influencing factors based on the problems. Aiming at the problem of low satisfaction with teaching and learning between the mentor and apprentice in the team, analysis and discussion on the management system, mentors, apprentices, and hardware conditions, etc., were done through internal team discussion to find the reasons for low satisfaction. The author used Delphi rounds to investigate each member of the Famous Senior TCM Physician Studio, and displays various reasons in the form of a cause-and-effect diagram (fishbone diagram). According to the Pareto chart, the main reasons for the low satisfaction of the master and apprentice were found. The main reasons were short follow-up time for apprentices, poor continuity of learning, the weakening of the mentor's awareness of teaching, the ability of mentors that awaits improvement, outdated and simple teaching equipment, and the lack of time for concentrated learning. The second step is to analyze the causes or influencing factors of the problem. Through separate meetings with the studio members, the influencing factors were found to be mainly due to each apprentice not having enough time to follow up and study due to his/her own clinical work, and the mentors are busy at their clinics, resulting in few opportunities for active mentoring. The third step is to find out the main reasons that affect the quality of education, which include the failure to realize the reasonable arrangement of clinical work and teaching work, the talent training model and system are not perfect, and the quality evaluation system of "apprenticeship education" is missing. The fourth step is to come up with measures and formulate practical plans aiming at the main causes. Based on the above problems, influencing factors and reasons, it was discovered that the apprentices in the team were unable to have enough time to follow up due to their own clinical work arrangements, resulting in learning content incoherence and low learning efficiency. Mentors are involved in busy clinical work and do not have enough energy to refine and summarize clinical cases to systematically impart their knowledge. Their teaching experience and ability are insufficient. In addition, the teaching content and methods are not standardized, and there is no uniformly recognized education evaluation standard, which leads to mentoring and learning at will. As a result, the satisfaction of both mentor and apprentice is not high. The study of TCM requires the methods of copying prescriptions from mentors, discussing cases, and organizing academic discussions to gain the academic thoughts and clinical experience of famous TCM practitioners. Among them, four diagnostic methods such as pulse diagnosis and tongue diagnosis in TCM, and acupuncture techniques such as "acupuncture to get qi", it is very difficult for apprentices to master and understand them through reading if there is no one-to-one guidance in the clinical process according to specific cases and without accumulating a large amount of clinical experience^[2]. Determine the target based on the above situations, establish an apprentice follow-up learning system with focus on the content and form of learning, a reward and penalty system for tutors, apprentices, and a teaching evaluation plan. By holding separate meetings with mentors and apprentices, members get together face-to-face, inspire each other, use interactive group methods to formulate plans, brainstorm and discuss issues that need to be resolved, and make joint decisions to formulate various feasible solutions.

2.2 Implementation Stage

According to the plan, apprentices are scheduled to take turns off their jobs and follow up for consultations. During follow-up, they will be the mentor's teaching assistant to complete the necessary learning tasks as required. At the same time, collect cases data, including prescription records, pictures and videos related to diagnosis, and disease records, etc. Continuous and complete clinical medical records of the tutors are required, and summarize the attended cases. While comprehending the style and characteristics of the tutor's fortes at treating diseases, apprentices should also comprehend and inherit the academic thoughts of the famous senior TCM practitioners. The mentor can use the medical records compiled by the apprentices for teaching, and arrange a fixed time every week for group study and discussion. The learning content is mainly case sharing and review of the "four classics" of TCM. With the mentor leading the teaching process and the apprentices serving as the main subjects of learning, discussions and exchanges are conducted between mentors and students and among the students. Based on the collective team learning, promote teaching with learning, and develop mentors' abilities with teaching, to strengthen the team's overall TCM thinking. Encourage and promote each team to form its own organizational culture, and enhance teamwork and cohesion. Improve teaching hardware facilities and make full use of computer information network technology to solve the learning obstacles in space and time for apprentices. Regularly carry out the "Famous Senior TCM Physician Studio" academic report exchange meeting, invite well-known TCM experts both domestic and abroad to comment and promote academic exchanges.

2.3 Inspection Stage

Establish a quality supervision team for the "Famous Senior TCM Physicians Apprentice Education" in the hospital, and conduct regular inspections on the "Famous Senior TCM Physicians" team of each mentor and perform assessment in accordance with the teaching evaluation. The inspection content mainly focuses on the collation of clinical cases and the records of collective learning, and strives to be effective in the learning process. The number of cases, the level and number of academic papers and academic exchange meetings are used as the quantitative indicators for assessing the quality of the team's "apprentice education". At the same time, apprentices and patient satisfaction survey forms are regularly issued and statistically analyzed as reference indicators.

2.4 Management Stage

There are two steps in this stage. The first is to analyze and summarize the results of the quality inspection of "apprenticeship education", reward outstanding teams and individual mentors, and incorporate the experience and results obtained into relevant standards and regulations to consolidate the achievements. Provide feedbacks on the lessons learned and bad results to the team mentors to avoid recurrence. The unresolved problems and newly discovered problems are passed to the next PDCA cycle as the basis for formulating the next step of the plan.

3 Conclusion

After using the PDCA cycle quality management to carry out the "apprenticeship education reform", the mentors and students of each TCM studio team were surveyed on teaching and learning satisfaction, and it was found that the satisfaction was significantly higher based on the apprenticeship education carried out by our famous senior TCM studio, which has effectively promoted the overall level of Chinese medicine in this hospital. Young TCM practitioners took turns to take leave and follow the mentors to learn on diagnosis, and then combined with their own experience to summarize and generalize the clinical cases. Further combined with the study on diagnosis and treatment of clinical cases during the team concerted learning, many "hidden knowledge" of the famous senior TCM experiences that "can only be understood by heart but not conveyed in words" can be absorbed and passed on. These knowledge can be applied, promoted and carried forward in future work, which is conducive to the inheritance and development of the clinical experience and academic ideas of famous senior TCM by young TCM practitioners^[3]. The famous senior TCM mentors led the apprentices in reviewing the TCM classics, and combined with the mentors' evaluation, application and explanation on these classics, young apprentices can have a deeper grasp of the TCM theories such as Shang Han Lun (Treatise on Exogenous Febrile Disease) and Wen Bing Xue (Science of Epidemic Febrile Disease) etc. Through this learning mode, young TCM apprentices in the hospital have significantly improved their key clinical capabilities, such as medical interviews, fourdiagnosis of the TCM, clinical assessment, dialectical thinking, rationale and prescriptions, organizational effectiveness, and comprehensive capabilities. It has verified the rationality and scientificity of nurturing by "reading classics, following famous mentors, and attend to the clinic more" in TCM, and fully exhibits the advantages of the "apprenticeship education" model^[4]. The regularly held "Famous Senior TCM studio" academic reporting and exchange meetings, and the conduction of academic exchanges with well-known TCM experts domestic and abroad have broken the limitations of the education model of sticking to only one school of thoughts and one sect. This enables apprentices to embrace all aspects of academic thinking, and at the same time broaden their mentors' vision, encouraging mentors to learn through teaching, and establishing a good learning culture, which is conducive to the overall improvement of the hospital's TCM clinical capabilities and the nurturing of comprehensive medical literacy. With the promotion of PDCA cycle method quality management, the hospital has gradually established a relatively complete talent training system for the inheritance of old and new TCM culture. With the construction and development of the work of "Famous Senior TCM studios", the hospital has gradually shift the inheritance of TCM to the development in academic exchanges, information sharing, scientific research and industrial transformation, which will promote the development of TCM in the region.

References

- Li HW, Wang QF, Fu Y, et al. Thoughts on the Education of Chinese Medicine Practitioners from the Perspective of "Traditional Chinese Medicine Law" [J]. Journal of Traditional Chinese Medicine, 2017, 58(21): 1882-1884,1890.
- [2] Zhang GF, Li LQ, Hu YY, et al. Exploration and practice of TCM master-apprentice education reform under background of modern apprenticeship and information-based teaching[J]. China Modern Doctor, 2020, 58(3): 166-169.
- [3] Liu YJ, Huang DM, Gong P, et al. Exploration and Practice of Building a Team of Chinese Medicine Gynecology Teachers based on "Famous Senior TCM Physician Studio"
 [J]. Research of Integrated Traditional Chinese and Western Medicine, 2019, 11(6): 319-320.
- [4] Lian JW. The Eighteen-Character Mnemonic to Build a Path to Becoming a Famous Chinese Medicine Doctor (Part 2) [J]. Zhejiang Journal of Traditional Chinese Medicine, 2011, 46 (3): 164-166.