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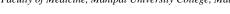
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Review Article

Enhancing medical education through personal enrichment competency modules: Integrating multifaceted skills for modern healthcare practice

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ABSTRACT

The implementation of Personal Enrichment Competency (PEC) modules in medical education curricula should be recognized as an initiative that is geared towards developing students' multifaceted skills and assets which would be required in modern medical practice. PEC modules will be implemented using an integrated approach which suggests putting content in different subjects and making the PEC concepts part of both medical and health science courses for students to have experiential learning experiences. Emphasis is put on strategies that motivate active learning, involving, for example, interactive lectures, case-based discussions, role-playing activities, games and project tasks, to generate engagement and comprehension of key competencies. Disciplines from the same healthcare but from various programs have an opportunity to share ideas through the multidisciplinary teams which develops teamwork, communication, and respect for diverse perspectives within institutions. The continuous assessment and improvement make sure that the PEC modules are always up to date, problem-solving as well as answering the ever-changing requirements of the healthcare field. Institutions can achieve this goal through regular feedback mechanisms and assessment of students' knowledge and skills data, which will help them find limitations in the PEC programs and improve their modules to make them work well in the field of modern medical practice. Lastly, incorporating PEC modules into the curriculum helps students gain the advanced skills of teamwork, leadership, communication, ethics and values in healthcare. Overall, they are well equipped to excel in the delivery of patient-centred care in different clinical settings after their training. Such a study gives essential findings to medical education resources who are striving to improve their curricula to be able to upskill future healthcare professionals to embrace the demands of current medical practice.

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1. Introduction

Tradition has narrowed the main role of medical education in imparting clinical knowledge and technical skills to students who desire to become healthcare professionals.¹ Although clinical competence is a pillar of medical training, the current trend of healthcare delivery requires a new skill set from future practitioners.² Realizing the intricacies of a modern healthcare system, medical education programs are now more and more integrating the skills acquisition modules into the curricula.³ These PEC modules spend much time on non-clinical skills which are critical in the practice in health settings.⁴ Communication, teamwork, leadership, and ethics and values are the core competencies that are mainly addressed. These proficiencies are the basic ones for the promotion of safe care, better health results, and effective relationships among healthcare workers.^{5–8} The foundation of the PEC modules for medical education is based on the idea that the provision of decent healthcare is not only a matter of competence in clinical issues but also the ability to work as a team member in a multidisciplinary environment, to communicate with

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patients and colleagues respectfully, to make the right ethical choices, and to demonstrate leadership skills in different healthcare contexts. PEC modules are among the tools that medical colleges use to produce healthcare workers who are prepared to deal with the stresses of the diversified and dynamic healthcare environments. This preventive measure is not solely intended to improve the professional development of the students but also ensures the quality and safety of patient care.⁹

In the next parts of this essay, the significance of each PEC competency, the strategies to implement the PEC training, and the suggestions for future directions in medical education will be discussed. In this regard, we seek to emphasize the significance of incorporating PEC modules into the medical curriculum as well as their impact on the formation of future health leaders. The aim of this review paper is to conduct a thorough analysis of the integration of personal enrichment competency modules into medical and health science programs. This involves looking into the reasons for the integration, examining the reasons of the integration, describing different approaches to the integration, and predicting the future directions. This review aims to contribute to the ongoing discussion on healthcare education and practice and to provide the basis for the improvement of the preparation of future healthcare professionals.

2. Teamwork Skills

Interpersonal skills are a critical component of the healthcare system, providing the foundation through which different disciplines work together as one unit.¹⁰ However, in the healthcare sector, where the patient needs are not restricted to their respective specialities, collaboration and teamwork are considered the key elements of the provision of patient-centred care.¹¹ It involves the unification of healthcare providers from different backgrounds, disciplines and thoughts, who all aim at the same target – the delivery of best practices through teamwork.¹²

Successful teamwork in healthcare settings is based on the principles that are the cornerstone of the whole system. The core of teamwork lies in robust communication, where information, ideas and opinions are shared smoothly and constantly among the team members.^{7,13} The transparent communication pathways facilitate the transmission of patient's crucial data, ensure that the time is taken for decision-making, and also the shared understanding of the goals and objectives within the team.^{14,15} Furthermore, teamwork in its best form displays the principle of mutual respect, in which all team members' contributions are considered as having equal value, regardless of their position on the hierarchical ladder or the field of study.¹⁶

Good teamwork implies the team members' collective responsibility and accountability for patient outcomes.⁶ Members of interprofessional teams take on different roles

while bringing their specialized knowledge and skills to the common aim of patient care.¹⁷ This approach to collaboration not only optimizes resource utilization and workflow efficiency in addition ensures that patients are provided with complete and coordinated care that addresses their multiple needs.¹⁸ Apart from this, teamwork entails adaptive leadership, which is a competence that includes the ability to be flexible and agile in dealing with changing healthcare environments.¹⁹ Adaptive leaders can inspire and motivate their team members, create a culture of innovation and continuous improvement, and also steer the team through the uncertainties that change might bring.²⁰

In the broader context of healthcare practice, the importance of teamwork skills is not just about clinical outcomes but also about the job satisfaction and wellbeing of healthcare providers.²¹ A positive teamwork culture promotes an atmosphere of trust, camaraderie, and collaboration, which, in turn, increases job satisfaction and prevents burnout among its members.²² Also, effective teamwork cultivates a culture of learning and personal development, wherein individuals share their experiences, learn from each other and strive together for excellence in healthcare delivery.²³

Cultivating teamwork skills in the medical education curriculum is therefore a priority task, according to Bleakley.²⁴ IPE initiatives provide students with an unparalleled chance to work with peers from various healthcare disciplines, growing their ability to function in a team and the importance of interprofessional collaboration.²⁵ Through simulation-based training, students are put in a situation where they have to work in a team in realistic patient scenarios, which is a safe and controlled environment, and thus they can learn and refresh their teamwork skills.²⁶ Additionally, the implementation of TBL (team-based learning) techniques in the medical curricula stimulates students' active involvement, peer teaching, and teamwork, which eventually leads to a good teamwork skill and readiness for collaboration in the medical practice.²⁷ Reflection and feedback mechanisms are the means through which students can understand the impact of their teamwork experiences, pinpoint the areas for improvement and work on their skills over time, which is a process that promotes lifelong learning and development.²⁸ Another aspect of this is the demonstration of positive role modelling by faculty and healthcare professionals who serve as the best examples of teamoriented and inspiring teamwork behaviours. This is a powerful approach for instilling aspirational teamwork behaviours, and it contributes to the emergence of a new generation of leaders in the healthcare sector who embody the principles of effective collaboration and teamwork.²⁹

3. Leadership Skills in Healthcare

Leadership competencies in healthcare, as part of the medical education, is a key element that helps to foster the development of effective leadership skills among healthcare professionals.³⁰ In the fast-paced and everchanging healthcare delivery system, leadership serves as a pillar for guiding interprofessional teams to attain common objectives, maximize patient outcomes, and drive effective organizational change.³¹ This module is designed to cover different types of leadership in healthcare, enabling students to acquire the necessary knowledge, mindset and skills to take on leadership roles and responsibilities in healthcare settings.

The investigation of leadership theories and models is the primary part of leadership skills in healthcare. Students are given an overview of different leadership styles, including transformational, transactional, situational, and servant leadership and other styles as well. By critical analysis and discussion students discover the strong and weak sides of each approach to leadership and develop a profound view of the different applicability of each approach in particular healthcare settings.³² Additionally, the students are immersed in the intricacies of the core competencies of effective healthcare leadership. These abilities consist of a multifaceted set of skills which are not limited to communication, decision-making, strategic planning, and team building. Via case studies, role-playing activities, and interactive workshops, students are expected to practice these abilities in a fictional healthcare setting, where they can experience real-life leadership challenges and scenarios.

The module will pay special attention to leadership in the process of generating innovation and effecting changes in healthcare institutions. Students are exposed to the strategies that can be used to create a culture of constant change, innovation, and learning in healthcare teams and organizations.³³ They realize how to spot innovation possibilities, using technology and evidencebased practices to improve the quality of patient care, workflow management, and organisational effectiveness.³⁴ Leadership Skills in Healthcare gives prominence to ethical leadership and professionalism as well. Students are being helped to understand what ethical principles and values are in place for healthcare leadership, such as integrity, transparency, and accountability.³⁵ They familiarize themselves with ethical dilemmas that are usually faced in healthcare leadership roles and develop strategies for ethical decision-making and conflict resolution. The course allows students to delve into their leadership styles, strengths, and areas of improvement. They undergo self-evaluation exercises, peer review sessions, and mentorship programs to develop their self-awareness and leadership skills.³⁶ Students can get ready for dynamic leadership roles in the complex and changing healthcare

system through the development of a growth mindset and a commitment to lifelong learning.

4. Communication Skills

Communication Skills in Healthcare is a vital part of the medical education, which focuses on the significant role of effective communication in providing better patient care, emphasizing interprofessional collaboration, and improving patient outcomes.³⁷ This module regards communication as a basic skill for healthcare professionals, including verbal, nonverbal, and written communication skills needed to build trust with patients, to convey information accurately, and to develop positive relationships with other healthcare professionals.³⁸

The central theme of Communication Skills in Healthcare is the examination of patient-oriented communication. Students are taught to use empathy, compassion and cultural sensitivity in their communication with patients and their families, understanding the different backgrounds, preferences and needs of people who may require a healthcare service.³⁹ Through role-playing games, simulated patient encounters, and experiential learning exercises, students learn how to actively listen, provide emotional support, and engage in shared decision-making with patients, which enables them to become active participants in their healthcare journey.⁴⁰ Furthermore, this module deals with the value of patient-oriented communication as well as the need for effective communication among interprofessional healthcare teams.⁴¹ Students are trained to communicate effectively, courteously, and collaboratively with colleagues from different healthcare professions as they are aware of the complementary expertise and perspectives each member of the team has. They look at ways of creating an open environment, where conflicts can be resolved constructively and mutual respect and trust can be developed within the team.42

The skills in the area of Communication Skills in Healthcare require training in delivering difficult information and managing tough conversations. The students learn to manage sensitive subjects, like the c care, treatment options, and prognosis, with emotional intelligence, truthfulness and professionalism.⁴³ They learn to be compassionate, gentle and understanding in breaking bad news, providing emotional support to patients and their families and addressing their concerns and questions with openness and honesty. Other than that, this part also educates the students on the need for written communication skills in healthcare that include medical documentation, patient records and professional correspondence. Students are taught to create precise, concise, and accurate medical notes, providing a continuum of care and keeping the dialogue among healthcare providers.⁴³ They also discuss the methods of communication that can be used to send messages to other members of the healthcare team by writing reports, referrals, and electronic communication platforms.⁴⁴ Reflection and feedback are the two main tools that students use to improve their communication skills in the course. They get feedback from both classmates and instructors. They are directed to pinpoint areas where they need to improve, set goals for skill development and look for other chances for more learning as well as practice.⁴⁵ Through creating an environment of ongoing improvement and lifelong learning, Communication skills in healthcare equip students with the ability to communicate effectively in all the clinical settings they may encounter and to contribute to the delivery of patient-centred care.

5. Ethics and Values in Interprofessional Education

Ethics and values in interprofessional education are a crucial aspect of medical training, which focuses on the development of a competent ethical decision-maker, a professional person and a person who integrates values into collaborative healthcare practice.⁴⁶ This module is aware of the fact that ethical behaviour, based on common values, is a major condition for establishing trust, improving patient health, and preserving the integrity of healthcare as a profession.⁴⁷ In this course, ethics is studied in depth through the examination of ethical principles, moral dilemmas, and professional standards. Students will gain the knowledge and skills needed to confront complex ethical problems and adhere to the highest standards of integrity and professionalism.

One of the important components of Ethics and Values in Interprofessional Education is the exploration of core ethical principles that support the healthcare practice.⁴⁸ Students explore concepts like autonomy, beneficence, non-maleficence, and justice which are used in real-life scenarios while critically analysing their application.⁴⁹ They are introduced to the ethical frameworks and decision-making models where they learn to recognize ethical dilemmas, weigh the interests of various parties and arrive at ethically valid decisions together with other professionals.⁵⁰ In addition, this module deals with professionalism and the creation of values-based practice which is an important part of healthcare. Students think about the fundamental values of the healthcare profession like honesty, consideration, empathy, and respect for diversity and how these values contribute to patient-centred care and interprofessional collaborations.⁵¹ Through case studies, role-playing simulations and reflective discussions, students delve into the whole range of ethical issues related to professional conduct, learning how to deal with ethical problems and dilemmas in a way that would be both honest and professional.52

Ethics and Values in Interprofessional Education emphasizes the importance of cultural competence and sensitivity in healthcare practice.⁵³ Students learn to recognize and respect the cultural beliefs, values, and preferences of patients and their families, understanding how cultural factors can influence healthcare decisions and outcomes.⁵⁴ They explore strategies for promoting culturally competent care, enhancing communication, and building trust with patients from diverse backgrounds. In addition, this module addresses the ethical considerations inherent in interprofessional collaboration and teamwork.⁵⁵ Students explore issues such as professional boundaries, confidentiality, and the delegation of responsibilities within interprofessional teams.⁵⁶ They learn to navigate conflicts of interest, resolve ethical conflicts, and promote a culture of ethical conduct and mutual respect within the team.⁵⁷

Throughout the module, students engage in reflective exercises, case discussions, and ethical decision-making simulations to deepen their understanding of ethical principles and values-based practice. They are encouraged to critically reflect on their values, beliefs, and biases, and consider how these may impact their interactions with patients and colleagues. By fostering a culture of ethical awareness, reflection, and dialogue, Ethics and Values in Interprofessional Education prepare students to navigate the complex ethical landscape of healthcare practice and uphold the highest standards of professionalism and integrity in their careers.⁵⁸

6. Future Directions and Implementation Strategies

With medical education being shaped to fit the everchanging healthcare system, the incorporation and modification of the PEC modules will be of great importance in equipping future healthcare professionals with the tools to cope with the complexity of contemporary practice. Another possible direction in addition to the current one could be a widening of the modules to include the new competencies that are indispensable in healthcare, like resilience, adaptability, and innovative thinking. These modules could include experiential learning opportunities, interdisciplinary collaborations, and mentorship programs as a means of promoting students' mastery of these essential competencies. Moreover, emerging viewpoints that emphasize addressing the social determinants of health and cultural competency are reflected in the PEC modules, which reflect the broader shift towards a more patient-centred and holistic healthcare delivery system.

The efficient realization of PEC modules depends on thoughtful planning, cooperation, and institutional empowerment. There is a strategy that involves the integration of PEC content into the existing medical school curriculum to ensure that students have an opportunity to learn all the essential competencies during their learning process. Such a practice could involve the creation of PEC classes or the infusion of PEC content into the classes on professionalism, ethics, and communication skills that exist. The faculty development programs are crucial tools for the training of teachers with a focus on the knowledge and skills they need to carry out the PEC modules. Such training opportunities, workshops, and facilities should be provided to support the faculty in developing active learning techniques, case-based discussions, and reflective exercises to be integrated with their teaching.⁵⁹

In addition, interprofessional cooperation is one of the most critical components of the implementation of PEC modules, as many competencies, such as teamwork and leadership, necessitate collaboration across the healthcare disciplines. Institutes must work on interdisciplinary partnerships as well as create a chance for students to study with other healthcare professionals.⁶⁰ This could be done by designing joint interprofessional modules or conducting workshops and simulations where participants can enhance their teamwork and communication competencies. Besides, institutional commitment and support are important factors for the sustainability and scalability of the PEC projects. This includes but is not limited to the provision of resources for faculty training, curriculum development, and program evaluation.⁶¹ The course design also promotes a culture of continuous improvement, where feedback from the students, faculty, and stakeholders is being used to refine and develop the PEC modules in the future.

By applying these strategies, medical education institutions will succeed in making sure that PEC modules get students ready for the multifaceted complexity of modern health practice. Through the promotion of the development of essential skills such as resilience, adaptability, teamwork, and cultural competence, PEC modules make a great contribution to the creation of health workers who are highly skilled and can deliver patient-oriented care in various clinical settings.

7. Conclusion

PEC modules play a crucial role in medical education by providing future healthcare workers with the required skills and competencies needed to thrive in the dynamic healthcare environment. Utilizing modules for teamwork, leadership, communication, ethics, and values, medical education institutions will be capable of training students to face the multifaceted challenges of modern practice with confidence and competence.

This article has covered the future of PEC modules which lie in their continuous development to meet the growing needs of healthcare professionals and their patients. PEC modules can be enhanced to include cutting-edge skills like resilience, adaptability, and innovation, equipping students with the ability to meet the challenges of modern healthcare delivery. Ensuring the successful implementation of the PEC modules necessitates a multifaceted approach, which includes curriculum design, faculty development, interprofessional collaboration, and institutional support. Through the integration of PEC content into the existing curricula, the forming of interdisciplinary partnerships, and the provision of resources for faculty development, institutions can create a favourable environment that will be conducive to the development of essential competencies among the students.

Thus, PEC modules could be the future of education and the practice of medicine. The medical education institutions can help the students to become compassionate, competent, and ethical healthcare professionals who can provide the most appropriate quality of patient-centred healthcare in a complex healthcare environment, by investing in the development and implementation of PEC modules.

8. Source of Funding

None.

9. Conflict of Interest

None.

References

- Kaufman DM, Mann KV. Teaching and Learning in Medical Education: How Theory can Inform Practice. In: Swanwick T, editor. Understanding Medical Education: Evidence, Theory and Practice; 2018. p. 37–69.
- Hawkins RE, Welcher CM, Holmboe ES, Kirk LM, Norcini JJ, Simons KB, et al. Implementation of competency-based medical education: are we addressing the concerns and challenges? *Med Educ*. 2015;49(11):1086–102.
- Maeda A, Socha-Dietrich K. Skills for the future health workforce: Preparing health professionals for people-centred care. OECD Health Working Papers, No. 124. Paris: OECD Publishing; 2021. doi:10.1787/68fb5f08-en.
- Matthews EB, Rahman R, Schiefelbein F, Galis D, Clark C, Patel R. Identifying Key Roles and Responsibilities of Peer Workers in Behavioral Health Services: A Scoping Review. *Patient Educ Couns*. 2023;114:107858.
- Boykins AD. Core communication competencies in patient-centered care. ABNF J. 2014;25(2):40–5.
- Goh SC, Chan C, Kuziemsky C. Teamwork, organizational learning, patient safety and job outcomes. *Int J Health Care Qual Assur.* 2013;26(5):420–32.
- Rosen MA, Diazgranados D, Dietz AS, Benishek LE, Thompson D, Pronovost PJ, et al. Teamwork in healthcare: Key discoveries enabling safer, high-quality care. *Am Psychol.* 2018;73(4):433–50.
- Suter E, Arndt J, Arthur N, Parboosingh J, Taylor E, Deutschlander S. Role understanding and effective communication as core competencies for collaborative practice. *J Interprof Care*. 2009;23(1):41–51.
- 9. Balogh EP, Miller BT, Ball JR. Improving Diagnosis in Health Care. Washington (DC): National Academies Press; 2015.
- Manser T. Teamwork and patient safety in dynamic domains of healthcare: a review of the literature. *Acta Anaesthesiol Scand*. 2009;53(2):143–51.
- Flores-Sandoval C, Sibbald S, Ryan BL, Orange JB. Healthcare teams and patient-related terminology: a review of concepts and uses. *Scand J Caring Sci.* 2021;35(1):55–66.
- Stadick JL. Understanding health care professionals' attitudes towards working in teams and interprofessional collaborative competencies: A mixed methods analysis. J Interprofessional Educ Pract. 2020;21:100370.
- Babiker A, Husseini ME, Nemri AA, Frayh AA, Juryyan NA, Faki MO, et al. Health care professional development: Working as a team

to improve patient care. Sudan J Paediatr. 2014;14(2):9-16.

- Légaré F, Witteman HO. Shared decision making: examining key elements and barriers to adoption into routine clinical practice. *Health Aff (Millwood)*. 2013;32(2):276–84.
- Mackintosh N, Berridge EJ, Freeth D. Supporting structures for team situation awareness and decision making: insights from four delivery suites. J Eval Clin Pract. 2009;15(1):46–54.
- Salman W, Hassan Z. The impact of teamwork on employee performance. Int J Accounting Business Manag. 2015;4(1):77–86.
- Macnaughton K, Chreim S, Bourgeault IL. Role construction and boundaries in interprofessional primary health care teams: a qualitative study. *BMC Health Serv Res.* 2013;13:1–13.
- Alnasib MMS, Mutairi SL, Alazmi NA, Alotaibi MM, Monif AHH, Zmanan SA, et al. Driving Excellence in Healthcare: The Impact of Nurse-Technician Collaboration on Clinical Practice. *J Namibian Stud.* 2023;36:45–55.
- Thomas A, Suresh M. Readiness for agility adaptability and alignment in healthcare organizations. *IISE Trans Healthc Syst Eng.* 2023;13(2):161–74.
- 20. Deep G. The power of resilience and flexibility in business leadership: Adapting to change. *Magna Sci Adv Res Rev.* 2023;9(2):86–91.
- Zajac S, Woods A, Tannenbaum S, Salas E, Holladay CL. Overcoming challenges to teamwork in healthcare: a team effectiveness framework and evidence-based guidance. *Front Commun.* 2021;6:606445. doi:10.3389/fcomm.2021.606445.
- Swensen SJ, Shanafelt T. An organizational framework to reduce professional burnout and bring back joy in practice. *Jt Comm J Qual Patient Saf.* 2017;43(6):308–13.
- Chakraborty T, Ganguly M. Crafting Engaged Employees Through Positive Work Environment: Perspectives of Employee Engagement. In: Management Techniques for Employee Engagement in Contemporary Organizations. USA: IGI Global Scientific Publishing; 2019. p. 180–98.
- 24. Bleakley A. Broadening conceptions of learning in medical education: the message from teamworking. *Med Educ*. 2006;40(2):150–7.
- Utley J, Mathena C, Gunaldo T. Interprofessional Education and Collaboration: An Evidence-Based Approach to Optimizing Health Care. Champaign, Illinois: Human Kinetics; 2020.
- Lateef F. Simulation-based learning: Just like the real thing. J Emerg Trauma Shock. 2010;3(4):348–52.
- Burgess A, Diggele CV, Roberts C, Mellis C. Team-based learning: design, facilitation and participation. BMC Med Educ. 2020;20:1–7.
- Yan Z, Carless D. Self-assessment is about more than self: the enabling role of feedback literacy. Assess Eval High Educ. 2022;47(7):1116–28.
- Kurt Y, Turhal E, Batmaz F. Nursing students' processes of taking role models and being role models: A descriptive phenomenological study. *Nurse Educ Today*. 2024;132:106015.
- Warren OJ, Carnall R. Medical leadership: why it's important, what is required, and how we develop it. *Postgrad Med J*. 2011;87(1023):27– 32.
- Al-Sawai A. Leadership of healthcare professionals: where do we stand? Oman Med J. 2013;28(4):285–7.
- Heinen M, Oostveen CV, Peters J, Vermeulen H, Huis A. An integrative review of leadership competencies and attributes in advanced nursing practice. J Adv Nurs. 2019;75(11):2378–92.
- 33. Weintraub P, Mckee M. Leadership for innovation in healthcare: an exploration. *Int J Health Policy Manag.* 2019;8(3):138–44.
- Bhati D, Deogade MS, Kanyal D. Improving patient outcomes through effective hospital administration: a comprehensive review. *Cureus*. 2023;15(10):e47731.
- Bowman D, Swanwick T. Values-Based, Authentic and Ethical Leadership. In: ABC of Clinical Leadership. United States: Wiley-Blackwell; 2017. p. 77.
- Lawrence E, Dunn MW, Weisfeld-Spolter S. Developing leadership potential in graduate students with assessment, self-awareness, reflection and coaching. *J Manag Dev.* 2018;37(8):634–51.
- 37. Sheehan J, Laver K, Bhopti A, Rahja M, Usherwood T, Clemson L, et al. Methods and effectiveness of communication between hospital

allied health and primary care practitioners: a systematic narrative review. *J Multidiscip Healthc*. 2021;14:493–511.

- Kourkouta L, Papathanasiou IV. Communication in Nursing Practice. Mater Sociomed. 2014;26(1):65–7.
- Bok C, Ng CH, Koh JWH, Ong ZH, Ghazali HZB, Tan LHE, et al. Interprofessional communication (IPC) for medical students: a scoping review. *BMC Med Educ*. 2020;20(1):372.
- 40. Gorski S, Prokop-Dorner A, Pers M, Stalmach-Przygoda A, Malecki Ł, Cebula G, et al. The use of simulated patients is more effective than student role playing in fostering patient-centred attitudes during communication skills training: a mixed method study. *Biomed Res Int.* 2022;2022:1498692.
- Hunter J, Majd I, Kowalski M, Harnett JE. Interprofessional Communication-A call for more education to Ensure Cultural Competency in the Context of Traditional, complementary, and Integrative Medicine. *Glob Adv Health Med.* 2021;10:21649561211014107.
- 42. Adham TKI. Conflict Resolution in Team: Analyzing the of Conflicts and Best Skills for Resolution. *Sch J Eng Tech*. 2023;11(8):152–62.
- 43. Ekberg S, Parry R, Land V, Ekberg K, Pino M, Antaki C, et al. Communicating with patients and families about illness progression and end of life: a review of studies using direct observation of clinical practice. *BMC Palliat Care*. 2021;20(1):186.
- 44. Mccormack L, Sheridan S, Lewis M, Boudewyns V, Melvin CL, Kistler C, et al. Communication and dissemination strategies to facilitate the use of health-related evidence. *Evid Rep Technol Assess* (*Full Rep*). 2013;213:1–520.
- Jackson D. Employability skill development in work-integrated learning: Barriers and best practice. *Stud High Educ*. 2015;40:350– 67.
- 46. Zechariah S, Ansa BE, Johnson SW, Gates AM, Leo GD. Interprofessional education and collaboration in healthcare: an exploratory study of the perspectives of medical students in the United States. *Healthcare (Basel)*. 2019;7(4):117.
- Mueller PS. Teaching and assessing professionalism in medical learners and practicing physicians. *Rambam Maimonides Med J*. 2015;6(2):e0011.
- Grace S, Innes E, Joffe B, East L, Coutts R, Nancarrow S. Identifying common values among seven health professions: An interprofessional analysis. J Interprof Care. 2017;31(3):325–34.
- Varkey B. Principles of clinical ethics and their application to practice. *Med Princ Pract.* 2021;30(1):17–28.
- Machin LL, Proctor RD. Engaging tomorrow's doctors in clinical ethics: implications for healthcare organisations. *Health Care Anal.* 2021;29(4):319–42.
- Poorchangizi B, Borhani F, Abbaszadeh A, Mirzaee M, Farokhzadian J. The importance of professional values from nursing students' perspective. *BMC Nurs.* 2019;18:26. doi:10.1186/s12912-019-0351-1.
- Jones NL, Peiffer AM, Lambros A, Eldridge JC. Problem-based learning for professionalism and scientific integrity training of biomedical graduate students: Process evaluation. J Med Ethics. 2010;36(10):620–6.
- Pecukonis E, Doyle O, Bliss DL. Reducing barriers to interprofessional training: Promoting interprofessional cultural competence. J Interprof Care. 2008;22(4):417–28.
- 54. Louw B. Cultural competence and ethical decision making for health care professionals. *Humanit Soc Sci.* 2016;4(2):41.
- Prosen M. Introducing transcultural nursing education: Implementation of transcultural nursing in the postgraduate nursing curriculum. *Procedia - Soc Behav Sci.* 2015;174:149–55.
- Supper I, Catala O, Lustman M, Chemla C, Bourgueil Y, Letrilliart L. Interprofessional collaboration in primary health care: a review of facilitators and barriers perceived by involved actors. *J Public Health* (*Oxf*). 2015;37(4):716–27.
- Jaarsveldt DEV, Joubert A. Navigating diversity with nursing students through difficult dialogues: A qualitative study. *Int J Afr Nurs Sci.* 2015;2:34–41.

- Andersson H, Svensson A, Frank C, Rantala A, Holmberg M, Bremer A. Ethics education to support ethical competence learning in healthcare: an integrative systematic review. *BMC Med Ethics*. 2022;23(1):29.
- Seshan V, Matua GA, Raghavan D, Arulappan J, Hashmi I, Roach EJ, et al. Case study analysis as an effective teaching strategy: perceptions of undergraduate nursing students from a Middle Eastern country. *SAGE Open Nurs.* 2021;7:23779608211059265.
- Green BN, Johnson CD. Interprofessional collaboration in research, education, and clinical practice: working together for a better future. J Chiropr Educ. 2015;29(1):1–10.
- Kauff M, Bührmann T, Gölz F, Simon L, Lüers G, Kampen S, et al. Teaching interprofessional collaboration among future healthcare professionals. *Front Psychol.* 2023;14:1185730.

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