

Assessment of Obstetrics and Gynaecology Consultants Comfort with Delivering Postgraduate Virtual Teaching

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Background

Virtual learning has permeated postgraduate medical education during the COVID-19 pandemic. Potential advantages of virtual learning include flexibility, control over activities and decreased risk of exposure/transmission of COVID-19.

Virtual learning may be particularly useful for postgraduate medical education. Shift work and working time directive often interfere with attendance at teaching. One solution involves recording virtual sessions for future viewing.

Continued medical education (CME) for postgraduate Obstetrics and Gynaecology trainees in Northern Ireland is normal delivered by the consultant body in a face-to-face capacity, on a bi-monthly basis. Due to COVID-19, these teaching sessions were not able to occur. With the current pandemic it is important that we explore other options for delivering CME to postgraduate trainees including virtual delivery.

Aim

To assess the viability of the consultant body delivering a virtual CME programme for obstetrics and gynaecology trainees in Northern Ireland.

Methodology and Methods

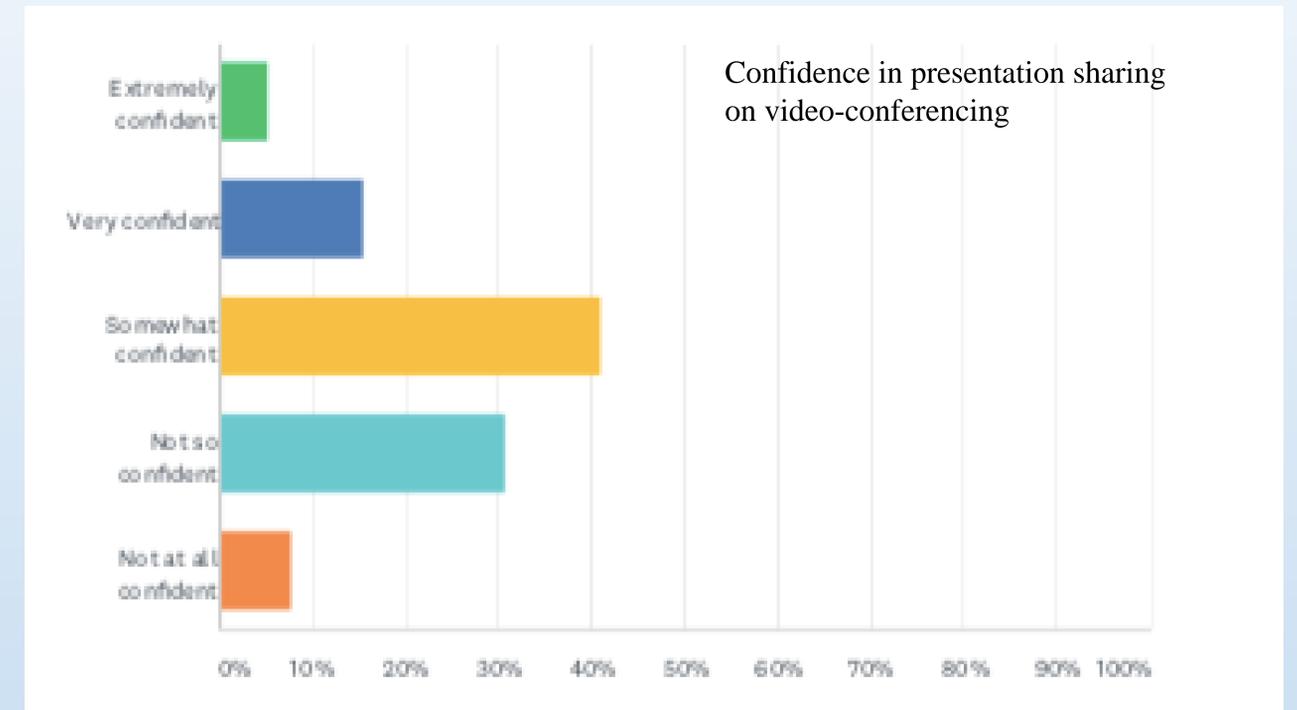
Survey monkey sent to consultants to find out about their experience with virtual teaching and whether they would be comfortable teaching on a virtual session.

Study Findings

41 consultants completed the virtual teaching survey. 66.67% had never used video-conferencing to teach medical students/doctors. 97.4% of consultants had used ZOOM before. 89.7% were aware of the capability to share presentations on video conferencing platforms.

5.1% were extremely confident, 15.4% very confident, 41% somewhat confident, 30.8% not so confident and 7.7% not at all confident with presentation sharing on the video conferencing platform. 14 consultants were aware of the ability for break out sessions, with only 1 consultant confident in organizing break out sessions.

87.2% of consultants would consider delivering CME on Friday afternoon via video-conferencing as opposed to the traditional face-to-face lecture style, reducing traveling time and inconvenience.



32 consultants would have no objections to presentations being recorded, so that trainees with working commitments would have the opportunity to attend.

Other Comments



Conclusions

Consultants are keen to provide this method of teaching but require further training to deliver. Having consultants teach via zoom improves access to a diverse and rich knowledge base for postgraduate trainees.