

Medical Students' Attitudes to Delivery of the Year 3 Medical Programme

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Background

General Medicine is a major subject area in Year 3 of the medical degree course at Queen's University. In 2018 it was delivered across ten hospitals with little specific standardisation of teaching methods and content. The GMC calls for medical schools to provide clear learning outcomes from placements.^{1,2} Their guidance states that medical schools should evaluate the effectiveness of their clinical placements. This should consider the views and attitudes of the students.

Methodology

Qualitative data was obtained. Participating students had completed their medical rotation within eight months. Four semi-structured focus group discussions were held, involving twenty-three students, at which point, data saturation was achieved. Transcripts were interpreted using thematic analysis.

Results

Four broad subject areas were identified; overall organisation of the programme, methods of delivery, perceived aids to learning, and perceived barriers to learning. Within the area of overall organisation, five themes were most prevalent; need for structure, lack of standardisation, perceived knowledge gaps, desire for a well-defined curriculum, and the need for improved communication between university and hospitals. Within the methods of teaching, students preferred bedside and case-based teaching, but felt that online learning tools can provide standardised teaching for students.

Theme	Example Quote	N=	%=
Need for structure	<i>"I'd say the biggest problem I have with general medicine is the lack of structure. It seems to be all over the place a lot of the time."</i>	16	73
Desire for well-defined curriculum	<i>"Even people I've talked to in the years above have all said that you just get to that stage where you're like, what the hell am I meant to learn for this exam? It's just like, it's just for general medicine there is just so much"</i>	14	64
Lack of standardisation across hospital sites	<i>"But there's so much variation between hospitals, like Altnagelvin will be so much different to the royal, and that will be different compared to Daisy Hill. So there has to be something kind of standardised"</i>	11	50
Perceived gaps in teaching and knowledge	<i>"So overall, I thought that the teaching was really good, but I do feel that there was probably gaps, and we probably got a lot more of certain topics just because those were the topics that... they like to teach us on."</i>	10	45
Communication between University and hospital sites	<i>"I think the big thing is communication between Queen's as the Uni and the Trust as teachers. It just seems so illogical that they don't know what's going on."</i>	9	41

N	23
Median Age	21
Female	14 (61%)
Male	9 (31%)
Undergraduate	16 (70%)
Postgraduate	7 (30%)

Discussion and Conclusions

This study highlighted the importance of structure, standardisation and having clear communication between the University and the Hospitals responsible for delivering teaching. It further gives weight to the already known benefits of case-based and bedside teaching and highlighted the perceived benefits of online learning tools. We should seek to utilise these tools.

The Covid-19 pandemic has greatly impacted medical education and the way in which it is delivered. A greater emphasis has been placed on online and remote learning and access to bedside teaching has been significantly curtailed. We as educators have to work harder and innovatively to deliver teaching effectively and safely. It is vital to consider the views of students during any decision making and strategic planning of the medical curriculum.

References

1. General Medical Council. Clinical placements for medical students. 2011
2. General Medical Council. Promoting excellence: standards for medical education and training. 2015