

Medical Teacher



ISSN: 0142-159X (Print) 1466-187X (Online) Journal homepage: informahealthcare.com/journals/imte20

Inspiring trainees to consider a career in medical education

Dr Prashant Kumar, Dr Tamsin Cargill, Dr Sarah Fellows & Dr Heather Moore

To cite this article: Dr Prashant Kumar, Dr Tamsin Cargill, Dr Sarah Fellows & Dr Heather Moore (2014) Inspiring trainees to consider a career in medical education, Medical Teacher, 36:3, 273-273, DOI: 10.3109/0142159X.2013.848973

To link to this article: https://doi.org/10.3109/0142159X.2013.848973

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suggest to engage more in medical education – AMEE offers numerous possibilities, so save the date for next year's conference in Milan!

Lukas Peter Mileder, Clinical Skills Center, Medical University of Graz, Auenbruggerplatz 33, 8036 Graz, Austria. Tel: +43/699/11751318. E-mail: lukas.mileder@medunigraz.at

Declaration of interest: The author reports no conflicts of interest.

Inspiring trainees to consider a career in medical education

Dear Sir

No sooner than newly qualified medical graduates have found their feet in their first jobs, they are already being asked to consider their long-term career direction. Many trainees spend vast sum of money and time on taster weeks, conferences and courses to become better informed and show 'dedication to a specialty'.

Medical education is rarely considered as a career by first year trainees, with the majority pursuing more established pathways such as surgery and general practice (Svirko et al. 2013). Although there are several courses that aim to improve teaching skills, opportunities for foundation doctors to discover how to pursue medical education as a career are lacking. Furthermore, the absence of a clearly defined career pathway (Cheung 2010) may deter some trainees.

We organised a heavily subsidised National Medical Educators Conference, aimed at foundation doctors and medical students. Eminent medical educationalists gave keynote speeches on pathways of career progression and inspired delegates to consider medical education as a career. Delegates were also given the opportunity to present their work in the field of medical education to share and disseminate ideas and examples of best practice.

The field of medical education may miss out on talented individuals who slip through the net because they are unaware of the opportunities available to them. We feel that more conferences aimed at junior trainees as opposed to those further along the career ladder as well as more of an emphasis on 'teaching and training' in the foundation curriculum, would encourage more trainees to explore medical education further.

Dr Prashant Kumar, Dr Tamsin Cargill, Dr Sarah Fellows and Dr Heather Moore, Department of Postgraduate Education, Milton Keynes General Hospital, UK. E-mail: Prashant.Kumar916@gmail.com

Declaration of interest: The authors report no conflicts of interest.

References

Cheung R. 2010. Fellowships in medical education. BMJ Careers. Available online http://careers.bmj.com/careers/advice/view-article.html?id= 20001585 [Accessed 4/8/2013].

Svirko E, Goldacre MJ, Lambert T. 2013. Career choices of the United Kingdom medical graduates of 2005, 2008 and 2009: Questionnaire surveys. Med Teach 35:365–375.

A faculty-facilitated nearpeer teaching programme: An effective way of teaching undergraduate medical students

Dear Sir

Near-peer teaching, where trainees of similar experience teach one another, is carried out informally in hospitals throughout the UK. Princess Alexandra Hospital (PAH) uniquely has a *Junior Clinical Fellow* (JCF) programme, a scheme which formally recruits FY1s in near-peer teaching roles. Five JCFs were competitively selected from a cohort of FY1s for the following roles: two PBL fellows, one OSCE lead, a fellow responsible for journal club/teaching seminars and one fellow responsible for bedside teaching, recruiting mentors and teaching seminars. The faculty provided logistical support and a study budget for the JCFs. These roles were negotiated with the hospital directorates. We conducted a retrospective qualitative study to assess whether the programme was successful

A questionnaire was designed to determine whether there was greater quantity of teaching from FY1s compared to other trusts, good standards of teaching compared to senior doctors, and whether teaching was relevant to their course and learning needs. In addition, we asked the FY1 JCFs and mentors about whether the programme provided teaching opportunities, encouraged a future in teaching, developed teaching skills and consolidated learning.

The following percentages of students (n=15) agreed or strongly agreed with the statements in the following categories: teaching quantity; 87%, content; 93%, relevance; 100%, needs; 100%. Teachers (n=11) agreed or strongly agreed: teaching opportunities; 91%, enhancement of skills; 100%, consolidation; 100%, further teaching; 100%. The semi-structured interviews were predominantly positive; one student stated: "Being taught by F1s was better than being taught by registrars/consultants. The junior doctors know exactly where we are in our clinical knowledge and the distinction between what you need to know on the ward and what you need to know for the exam". We also identified key problems: obtaining relevant feedback, demonstrating evidence of teaching activity and personal development as a teacher.