

In light of the COVID-19 pandemic, how have changes to the delivery of tutorials been received by fourth year University of Aberdeen medical students on their surgical rotation?

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Background

The Coronavirus-19 pandemic has caused significant changes throughout the University of Aberdeen, not least in how medical students are taught as part of their training. Covid-19 has resulted in hospital based, group tutorials moving online with the majority being delivered on Microsoft Teams. In some departments, further time pressures on more senior clinicians have been a catalyst for changing who delivers tutorials to medical students. This has been the case in Aberdeen's Orthopaedic department where the majority of year four tutorials have been conducted online, by Foundation Year 2 (FY2) doctors. Despite significant changes in how teaching is now being delivered, there has been little investigation to date, to assess how the current teaching setup has been received by medical students.



Aims

We therefore created this project to:

- Determine whether medical student teaching is more relatable and relevant when delivered by junior members of staff.
- Determine how Microsoft Teams is viewed by students as a teaching platform.

Method

To meet our aims, a questionnaire was developed and distributed to the 36 medical students undertaking their six week long Surgery and Critical care block as part of their year 4 curriculum in January and February 2021.

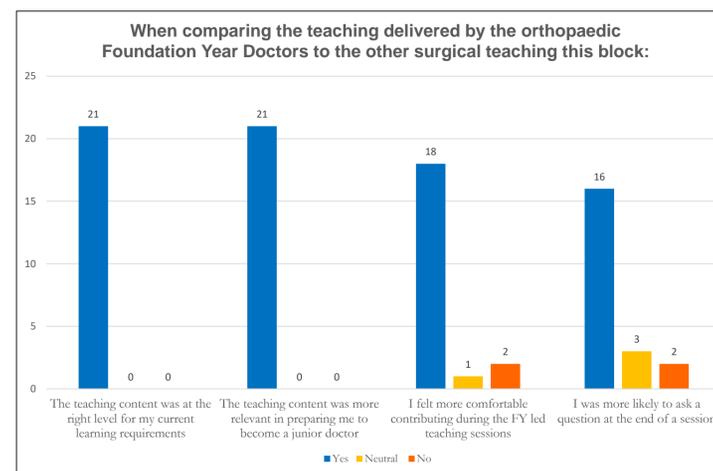
The first part of the questionnaire asked students questions which compared the teaching from the orthopaedic FY2s to other teaching which they received on during this block, often from more senior clinicians.

The second part of the questionnaire focussed on investigating how students found using Microsoft Teams as a teaching platform.

Results

Overall, 21 out of 36 students completed the questionnaire representing a 58% response rate.

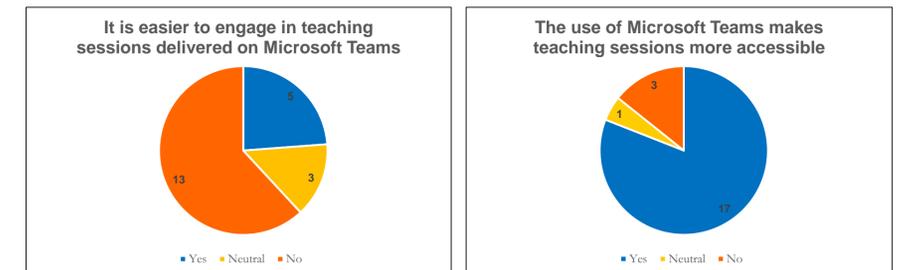
FY2 Led Tutorials:



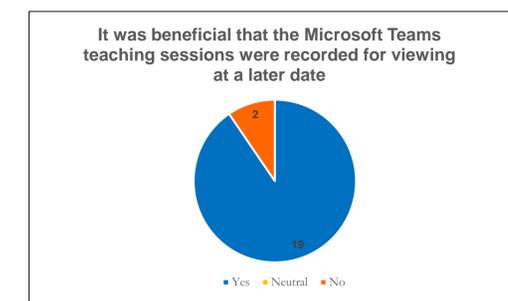
When comparing the teaching delivered by the orthopaedic FY2 doctors to other teaching delivered within the surgical block, 100% of students stated that the content was pitched at the right level. There was also unanimous agreement that FY2 teaching was more relevant in preparing them to become junior doctors. Furthermore, 86% of students stated they would feel more comfortable contributing in teaching led by FY2s, whilst 76% of students stated that they were more likely to ask a question at the end of a teaching session delivered by an FY2 doctor.

Comparing Microsoft Teams and Face to Face:

Conversely, 62% of students said they found it harder to engage in teaching delivered on Microsoft Teams when compared to face to face teaching.



However, 81% of students, said that the use of Microsoft Teams made teaching more accessible and 90% of students stated that they found it beneficial having the teaching sessions recorded to enable viewing at a later date.



Conclusion

The Covid-19 pandemic has been a challenging time for medical education. There is however, an opportunity to make positive changes from the lessons learnt over the past year. Given the overwhelmingly positive responses towards FY2's delivering tutorials, we hope to see this continue, freeing up senior clinicians whilst allowing junior staff to be involved in imparting key knowledge and advice to help prepare the next cohort of future doctors.

Although students appreciated the accessibility of using Microsoft Teams, the majority still prefer in-person tutorials and we conclude that efforts should be made to re-introduce face to face tutorials when safe to do so.

The recording of tutorials has proven to be of great benefit for students and we hope to see this continue even once face to face tutorials resume.