

Teaching Fellows in undergraduate medical education-the student's perspective

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ABSTRACT

Background: Currently there is a lack of data exploring the value added by Clinical Teaching Fellow posts over teaching led by regular working clinicians.

Aim: To explore the perceptions of medical students regarding the value attached to having fulltime Teaching Fellows to deliver undergraduate medical education.

Method: A total of 521 clinical year medical students from the University of Leicester were asked to complete an online questionnaire.

Result: 375 medical students responded to the questionnaire (72%). Forty five percent of students felt that full time clinicians did not have adequate time to teach, as opposed to 22% that felt otherwise, this result was statically significant (p value <0.0001). There was a demand amongst medical students to have doctors, with a clinical background, employed to teach, particularly because Teaching Fellows were more reliable in delivering high quality teaching (82%)(p value <0.0001). However, only a minority (21%) felt that formal teaching qualifications were required to deliver the best teaching. There was a mixed opinion regarding the cost-effectiveness of such full time posts.

Conclusion: This study highlights the need for Clinical Teaching Fellows as perceived by medical students. However, issues such as financially sustaining these roles on a large scale nationally and the need for formal qualifications in teaching to deliver effective medical education need to be analyzed further.

Keywords: Undergraduate, medical students, Teaching Fellows.

Background

In the past, the clinical years in medical education in the United Kingdom have been run on an ad-hoc basis where it was solely the clinicians or clinical academics who had the job of teaching medical students in NHS hospitals. The general concept behind this system was that a doctor who is good at his/her profession, is good enough to teach as well. Previously there was no stress laid on doctors who are involved in undergraduate medical education being trained as teachers or being well-versed with the various teaching methodologies [1,2,3,4,5]. On a positive note, the expectation was that clinicians in the old system imparted teaching which was clinically relevant to the doctors of the future, thereby preparing students for the challenges of their future careers.

However, clinicians tend to be very busy and their time is precious. Due to this, most students can recall times when no one was available to teach them, where the clinician who was supposed to teach them has been busy elsewhere. This is largely due to the fact that clinicians tend to have over-riding priorities such as ensuring proper patient care. Another drawback of the old system was the assumption that being a clinician made a particular person a good teacher. Finally, the idea of acquiring a formal qualification in medical education was virtually non-existent.

Over the past decade attitudes have changed, there is now more impetus towards training doctors as teachers in the NHS [6,7]. For example, doctors often now attend courses, workshops and even acquire formal qualifications in education. This is in line with recommendations from the General Medical Council, stressing the importance of doctors as teachers [8]. In addition, a large number of NHS hospitals and medical schools have employed junior doctors specifically for the purpose of teaching. These are usually doctors who have taken time out of training to broaden their horizons and improve their CV. Most of these posts are designated as “Clinical Teaching Fellows”.

Aims

The value added by Teaching Fellow posts to medical education is highly regarded by employers and post-graduate Deans [9]. However, the opinion of students is important as well as they are the main party who are affected by these posts. The perspective of medical students with regard to undergraduate teachers has been documented in the literature [10], but there is a lack of information specific to Clinical Teaching Fellows. Herein we aim to gather their opinion on the subject.

Methods

Medical students in their clinical years (3rd, 4th and 5th year) at Leicester medical school were emailed a structured questionnaire to gather their opinion regarding the value added by Teaching Fellows to their education. The questionnaire included a series of closed questions designed to collect quantitative data regarding the students opinions and a free-text question to collect qualitative data.

A total of 521 students were emailed. The results were entered into a excel database and analysed. Statistical calculation was done using the Graphpad QuickCalcs online calculator [11] using the Chi squared test.

Results

A total of 375 students (72%) responded to the questionnaire.

There was a fair representation from all the three years of students i.e. 27%, 38% and 35% for third, fourth and final year respectively (fig. 1).

The data from the questionnaires was analysed and the following themes came to light:

1. Time available to clinicians to impart teaching (fig. 2)

Forty five percent of students felt that full time clinicians did not have adequate time to teach, as opposed to 22% that felt otherwise, this result was statically significant (p value <0.0001). Students felt better preparation from clinicians prior to teaching sessions would improve their learning experience.

2. Improved standard of medical education (fig. 3)

A large proportion of the students (82%) stated in the questionnaires that, in their opinion, being taught by Teaching Fellows improves the standard of teaching (p value <0.0001). Majority of the students (68%) felt that Teaching Fellows tend to provide more personalised attention and teaching than clinicians (p value <0.0001) . Further, they felt that they can devote time to teaching without worrying about other commitments.

One student, for example stated: *“The Teaching Fellows do not have the responsibility of taking care of patients, so do not have other stress factors which act as time constraints. The Teaching Fellow can dedicate time to teaching you, with full concentration and attention without the risk of being called away or having to answer bleeps.”*

3. The importance of a formal qualification in education

In spite of the fact that the students felt that the Teaching Fellows improved the standard of education, only a small proportion of them (21%) felt that possessing a formal qualification

in education is a necessity for medical teachers (fig. 4). Further, many of them (43.5%) were unaware whether the people who taught them possessed any educational qualification or not. As a result it may be that the students were unable to appreciate the value of such a qualification.

One student commented: “*Qualifications (and to a little extent experience) are of LOW importance here. The BEST educators are people who LOVE to teach, NOT the MOST qualified.*”

4. Economic viability of teaching posts

Although students may not have much idea regarding the cost implications of such teaching appointments, in order to gauge their expectations, we asked them whether they thought recruiting doctors for the purpose of teaching is economically viable. The results indicate that many of them (44%) were unsure of this (fig. 5).

Discussion

Teachers have a significant role in facilitating the transfer of information to their students. The teacher has multiple roles to perform and most doctors are performing these tasks all the time without even knowing it. The roles are very well represented in table 1 [12].

The teaching and training of medical students and young doctors is now being increasingly recognised as vital, as is the need to continue to improve the standard of medical education. Due to the significance of teachers in this equation, it is important to support clinical teachers in performing their multiple roles to the best of their ability. Traditionally, this has been a problem as only a small proportion of clinical teachers had the chance to attend teaching workshops [2]. However, attitudes are now changing and increasing number of doctors are training to teach. Most NHS employers are also looking to improve the teaching skills of their staff by offering them either in-house training or supporting them to go elsewhere to improve their teaching skills.

In addition, a significant change with time has been more and more young doctors opting out of their training to take some time out to do a teaching post. Teaching posts might involve studying for a degree in education as well. These posts as mentioned above are called “Clinical Teaching Fellows”.

The recruitment for these posts is not only to overcome the drawbacks mentioned earlier with the traditional system of teaching, but also to justify the “Service Increment for Teaching” (SIFT). SIFT is provided to NHS hospitals to provide training [13]. Also, with the hike in the university tuition fee for students in England [14], there may be a rise in student/parent expectation regarding the standard of teaching. Employing individuals for the purpose of teaching could help

meet expectations, as post holders would be able to provide more personalised attention to students.

In addition, the doctors working in Teaching Fellow posts, may reduce the pressure on full-time clinicians by taking on some of their teaching workload. It is desirable that full-time clinicians continue to contribute to medical education, but perhaps a better spread of the workload can be achieved.

Conclusion

In summary, Clinical Teaching Fellows provide a vital part of undergraduate medical education here in the United Kingdom. Their contribution has been shown to be valued not only by employers and post-graduate deans but also by the students themselves. However, trying to maintain such jobs in the near future might be a challenge due to the current financial situation of the NHS with significant job cuts planned in the future [15].

Conflict of Interest: None declared.

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Table 1: Roles of a teacher

Facilitator		Role model		Assessor		Planner		Resource developer		Information provider	
Mentor	Learning facilitator	On-the-job role model	Teaching role model	Student assessor	Curriculum evaluator	Curriculum planner	Course organiser	Study guide producer	Resource material creator	Lecturer	Clinical or practical teacher

fig. 1 : Proportion of students in each year

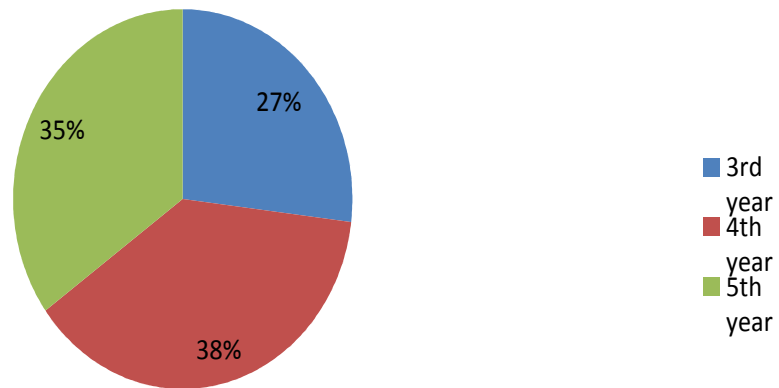


Figure 1: Proportion of students in each year

fig. 2: Adequate time available to clinicians to teach

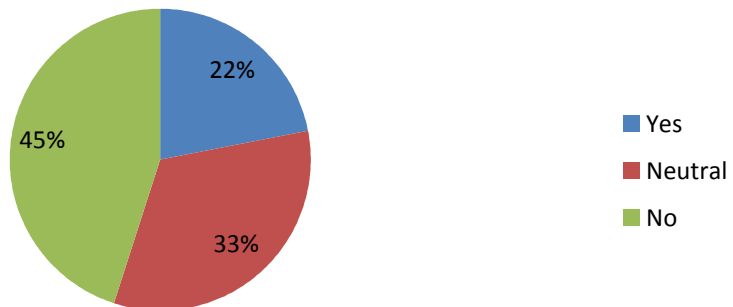


Figure 2: Do clinicians have adequate time to teach?

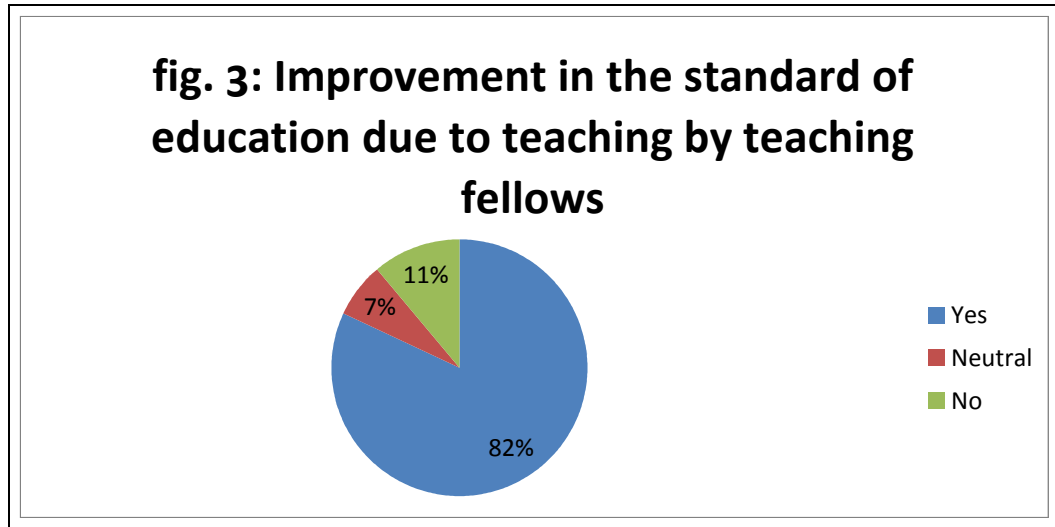


Figure 3: Improvement in the standard of education due to Teaching Fellows

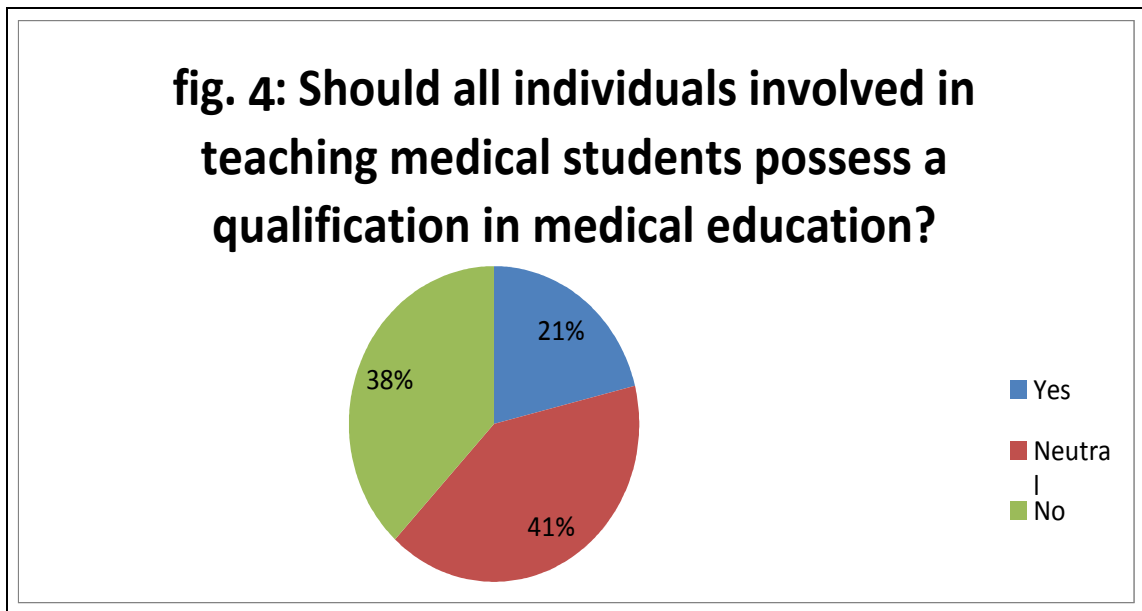


Figure 4: Should all medical teachers have a qualification in medical education?

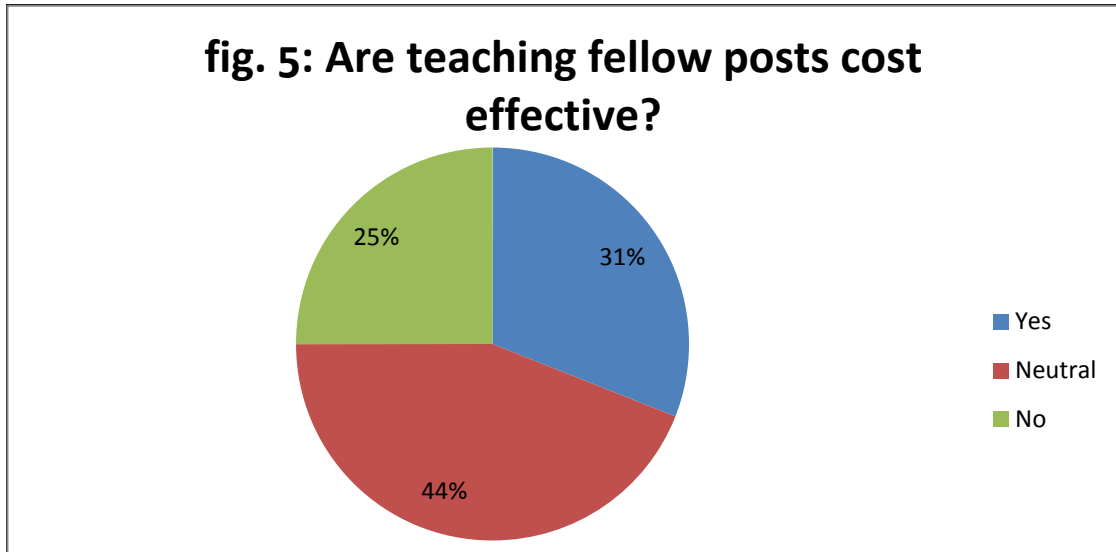


Figure 5: Are Clinical Teaching Fellow posts cost-effective?