Postgraduate Medical Courses: A Trainee Centred Approach

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Abstract

Background

Implementation of European Working Time Directive has changed the face of postgraduate medical training from a traditional apprentice model to an objective based competency model. In order to attain competencies set out in training curricula, courses have become commonplace. Not surprisingly, the number of medical courses being offered across all specialities has increased dramatically. Nonetheless, with a reduction in future study budgets and a lack of quality control of such courses, trainees can become increasingly demanding on what they seek from a course.

Aims

To improve the quality of medical educational courses, the aim of the study was to investigate what trainees desire when attending a medical course. The study also targeted exposing aspects that make the course more experientially valuable for the trainee.

Methods

A prospective cross sectional study on trainees attending a National Otolaryngology Course was performed in 2014. Trainees were asked to complete a 31-item questionnaire aimed at capturing: 1) What trainees desired from a course 2) How trainees felt a course is best organised and delivered 3) Confounding factors that affected trainees' perception. The questionnaire was given to all course delegates including Foundation Programme Doctors, Core Surgical Trainees, and General Practice Trainees.

Results

What Trainees desired:
100% of trainees preferred a one day course compared to courses spanning over multiple days with 70.8% preferring the course conducted during the week. When applying for the course 95.8% preferred an electronic application and 70.8% would preferentially select to pay electronically (as opposed to cash/cheques). 75.0% of trainees would be more likely to consider to attend a course if the fee was ≤£100.

The delivery of the course:

58.3% of trainees would recommend lecture durations of approximately 30 minutes, while 75.0% would recommend OSCE stations to run between 10-15 minutes.

Major confounding factors:

The quality of the catering was found to be one of the confounding factors with 75.0% of trainees acknowledging that the quality of the catering would have an affect on their perception of the course. 70.2% of trainees recognised that the geographic location of the course would also play a role in their perception of the course.

Conclusion

Courses will continue to remain an imperative aspect of the trainees’ training as it allows trainees to fulfil necessary requirements for progression, demonstrate a commitment to speciality and willingness to keep up-to-date with current practice. We present this list of aspects for organisers to consider prior to establishing further courses to help drive and improve their quality. The study has given trainees a voice on their preferences and expectations when attending such courses and we aspire trainees to reflect and demand more from their course organisers.

Keywords: course; trainees

Background

The general ethos is to develop a trainee doctor into a knowledgeable, skilled and safe specialist or consultant. In the United Kingdom (UK), the General Medical Council (GMC, 2011) is responsible for quality assurance of postgraduate training whilst Local Education and Training Boards (LETBs) are responsible for quality management.

LETBs and individual hospitals provide weekly or monthly educational activities for their trainees. However with the implementation of The European Working Time Directive (EWTD) (European Parliament, 2003) in order to attain competencies, trainees are also encouraged to engage in E-learning, simulation workshops, and to attend relevant educational courses. Indeed, the satisfactory completion of relevant courses is a mandatory requirement for appointment to all training programmes and attaining the Certificate of Completion of Training. Courses are seen as a good opportunity for trainees to focus and practice skills that may otherwise be difficult to do on a day-to-day basis in the hospital environment (Obi, & Bennet, 2010).

There are numerous educational courses available throughout the UK in all medical and surgical specialties. Some are more successful than others. Our aim is to investigate what trainees desire and perceive to be a good course.

Methods
In February 2014, we hosted a National Otolaryngology (ENT) Core Skills Course. This was targeted at trainee doctors with an interest in ENT or planning on pursuing a career in the ENT specialty. There were 24 course delegates. Course delegates included Foundation Programme Doctors, Core Surgical Trainees, and General Practice Trainees.

At the culmination of the course, all delegates were given the option to complete a 31-item questionnaire. There was a 100% response rate. All questionnaires were anonymous. Questionnaires included a series of questions which were aimed at capturing: 1) What trainees desired from a postgraduate medical course 2) How trainees felt a course is best organized and delivered 3) Any confounding factors that trainees felt affected their perception of a course.

**Results**

For the purpose of this article the results achieved can be broadly classified into two categories. The first category focuses around the process prior to attending a course (pre-course) and the second covering the course itself.

In the first category looking at the pre-course process, trainees were asked to state their primary motivation for attending the course. The most common reasons were, obtaining clinical skills (50%), gaining knowledge (45.8%) and interview preparation (37.5%). The most common sources of forthcoming courses were via email advertisement (58.3%) and online websites (58.3%). Word of mouth was the third most common method for finding courses (41.7%). On asking trainees how long a course should be advertised prior to the course start date, a wide range of responses were collected. This ranged from 4 weeks to greater than 12 weeks - 8 weeks (33%) and 12 weeks (29.7%) being the most popular time scales given. All trainees unanimously (100%) agreed that a course should preferably run for one whole day rather than half a day or more than one day. 95.8% of trainees agreed that on-line application would be preferable to other methods including postal or telephone modes. Regarding methods of payment, 70.8% of trainees would prefer to pay online, 29.2% using a cheque and no trainees indicated a preference to pay in cash. 75% of trainees deemed £100 or less to be an appropriate figure to pay for a one day course. 75% of trainees deemed a geographic location impacts whether a trainee attends a course in 79.2% of instances. 70.8% of trainees would prefer a course to run during a weekday rather than a weekend day. When asked what should be included in the information sent to delegates prior to the course, 95.8% would like to see a course programme, 83.3% would like to have directions to the course venue, 58.3% parking information and 54.2% a faculty list included.

The second category focussed on course structure and content. 79.2% find a course pack useful to have for the duration of a course. Trainees responded with a wide range regarding the number of delegates that would be ideal for a course. Although, the majority of responses indicated an ideal number of course delegates to be between 20 to 30, the responses ranged from 20 to 50. 37.5% of trainees felt that there should be fewer faculty members than trainees present, whilst an equal number of trainees responded (37.5%) that there should be an equal faculty to delegate ratio. 58.3% of trainees agreed that lectures should be approximately 30 minutes in duration. For OSCE style teaching, 75.0% of delegates felt that the ideal length should be between 10 to 15 minutes long. In clinical skills and OSCE teaching stations, 50.0% of trainees would like to have one-to-one practice with a faculty member whilst 45.8% favour being paired with another course delegate. Feedback provided should be in the form of a mixture of both verbal and written forms of feedback (91.7%). 62.5% of trainees were neutral to filling in pre-course and post-course questionnaires with 25.0% finding it useful and 12.5% finding it cumbersome. Quality of catering influences 75.0% of trainees' perception of the quality of a course and was identified as being a major confounding factor.
Discussion/Conclusion

With courses playing a key role in the current post graduate medical education system, it is not surprising to see a large number of courses on offer (Reynard, 2004). Organising a medical course is challenging and by no means a trivial task. Due to the increasing demand and importance of such courses, organisers need to be equipped with information to address the specific needs and preferences of trainees. Wyatt (1999) described important organisational aspects including structure, venue, accommodation, costs and faculty. In addition, Stephenson et al (2001) discussed a timeline that can be adopted of when the different aspects of the course should best be organised. There have been no published studies reporting the trainees’ or course delegates’ views on their needs and preferences from a postgraduate medical course.

The organisation of a medical course or conference can be divided into the pre-course process and the course day itself. Wyatt (1999), talks about ensuring adequate space, catering and dining facilities, bathroom facilities and ease of access. We report that from a trainee’s perspective, as well as the venue being suitable for the course programme as described by Wyatt (1999), its geographical location and accessibility are essential in over two-thirds of the trainees questioned. From this, we can derive that course venues that are more centrally located to cities and with good transport links would be more popular than those that are remote in location.

Speakers should vary according to the aims of a course or conference (Reynard, 2004). In our study, 95.8% of trainees reported a desire to receive the course programme and 54.2% the faculty list prior to the course date. This implies that trainees want to know what the content of a course is and the course faculty when considering signing up to a course. With this in mind, we suggest finalising a course programme and faculty at the point of course advertisement in order to attract the majority of interested trainees.

A reduction in study budgets throughout postgraduate medical training in the UK reflects the trainees’ responses of what they are prepared to pay for a course. Two-thirds of trainees report that ≤ £100 should be the cost of a one day course. Keeping a course affordable to trainees is important. Trainees also reported searching for courses via email advertisement and online websites as the most common methods of finding courses. A solution to reduce advertising costs and also target trainees most effectively would be to use online marketing strategies. This can be in the form of e-mail advertisements, advertisements on websites, online forums and social media. Using these methods could also link into allowing trainees to apply for a course and pay online. In our study, trainees reported these as their preferred methods for application and payment respectively.

In our study we have identified several key aspects which trainees value in the delivery of a well structured course. These include a course pack be given to them during a course, that a course is held on a weekday rather than weekend, and that feedback is in both written and verbal forms. The majority of trainees reported that 20-30 delegates was the ideal number for a course and lectures were limited to 30 minutes in duration. For OSCE style teaching, the majority of trainees found 10-15 minutes to be sufficient time per session with an equal number preferring one-to-one and paired teaching. Receiving such important trainee feedback should allow course organisers to appropriately tailor courses to trainees’ needs and preferences.

Catering was identified as an important confounding factor to the trainees’ perception of a course and organisers should take measures to allow for a good standard of catering facilities with sufficient time for refreshment breaks.
Take Home Messages

1. Trainees should be encouraged to attend postgraduate medical courses to assist with their overall learning and education. Course attendance allows trainees to fulfil necessary requirements for progression, demonstrate a commitment to speciality and willingness to keep up-to-date with current practice.
2. Trainees expect to receive detailed information prior to the course with online booking and payment facilities. The course itself should be within a financially affordable price range.
3. For a skills-based course, trainees appreciate a balance of lectures and hands-on practice with a reasonable number of delegates and equal numbers of faculty.
4. Facilities including geographical location, parking and catering are all important to the overall quality of the course as perceived by delegates.
5. Courses must address the trainees’ needs. The success of a course depends highly on whether the trainees’ needs are fulfilled. This ethos must be enshrined into all course organisers and faculty.

Notes On Contributors

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Appendices

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Declarations

The author has declared that there are no conflicts of interest.

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