

MEDICAL STUDENTS AS WHOLE PERSONS – TENDING TO THE ELEPHANTS IN CLINICAL PRACTICE TRAINING

Edvin Schei^{1*}, Eivind Valestrand¹, Hannah Gillespie², Beth Whelan³, J. Donald Boudreau⁴, Elizabeth Anne Kinsella⁵, Hilde Grimstad⁶, Monika Kvernenes², Terese Stenfors⁷

1* Corresponding author: University of Bergen, Bergen, Norway
edvin.schei@uib.no

2 Queen's University, Belfast, UK

3 Memorial University of Newfoundland, St. John's, Newfoundland, Canada

4 Faculty of Medicine and Health Sciences, McGill University, Montreal, Quebec, Canada

5 Institute of Health Sciences Education, Faculty of Medicine & Health Sciences, McGill University, Montreal, Quebec, Canada

6 Norwegian University of Science and Technology, Trondheim, Norway

7 Karolinska Institutet, Stockholm, Sweden

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BACKGROUND

For years, we have known that many medical students lose empathy and experience burn out during the last part of their undergraduate education, despite starting with high motivation and above average mental health. The most powerful learning environment is the clinic, where students in the final stages of their program interact with real patients and practice doctor's skills in authentic environments. We wondered how students at this stage are cared for as learners and novice professionals. We tried to identify explicit and hidden professional norms and competence goals that students are measured by, and sanctioned for not conforming with, in daily practice. We asked: Is there a mismatch between what medical students need to manage in their professional lives and the affordances inherent to the workplace environment where learning takes place? Can we intervene to mitigate any gaps?

METHOD

Inspired by the Consolidated Framework for Implementation Research (CFIR), we engaged leaders, physicians, residents, and medical students at a small Norwegian hospital in a three-year project aiming to improve students' motivation, participation, and clinical learning, by strengthening pedagogical and affective support during an 8-week practice period.

RESULTS

Medical students and residents identified needs for preparation and orientation, continuity, and secure relationships where learners are acknowledged as unique individuals. A simple model of learning needs was developed, where educational goals can be arranged on three levels: 1) social survival, 2) medical knowledge and skills, and 3) clinical wisdom. ■