Dear Editor,

We read with great interest the article by Ross et al. which assessed the impact of the COVID-19 pandemic on the future of medical education (1). Being fourth-year medical students, we experienced the upheaval in medical education which occurred in March 2020 as a result of the pandemic, and hence were employed as ‘Medical Student Support Workers’ at the Queen Elizabeth Hospital, Birmingham.

In this article, it has been indicated that the majority of students feel that the shift to remote learning has affected their student experience in numerous ways: increased anxiety concerning future competence, decreased satisfaction with medical education, lack of confidence in the clinical environment and difficulty in sustaining social relationships and communication skills (1). Despite the fact that studies indicate that there is no statistically significant benefits for online or in-person training, many medical students feel that face-to-face teaching is an important aspect of their learning (2,3). There is evidence that ‘blended learning’, which incorporates both online and clinical exposure, is the most appropriate approach for the education of healthcare students (4). Whilst most medical school curriculums usually consist of blended learning, this was disrupted during the pandemic, with most medical students across the UK being sent home from hospital placement. From our experience, working during the COVID-19 pandemic allowed students to continue engaging in clinical exposure, with even more opportunities to carry out practical tasks such as venepuncture and cannulation, than the usual medical curriculum allows.

COVID-19 allowed medical students to fully integrate within a multi-disciplinary team for the first time in our training, without rotating around different specialties. This was an invaluable experience, allowing us to engage in discussions about patient care with a variety of healthcare professionals and to greater understand the roles we are hoping to
fill in the future. From our experience, students were given greater responsibility to carry out administrative roles, practical tasks and communicate with other members of staff or relatives developing a wide range of skills which are often overlooked. We feel like this dismantled the medical hierarchy as the students were no longer disparaged or made to feel useless, but were valued as a member of the team. Ordinarily, medical students may only get this experience as part of a short ‘assistantship’ period prior to commencing their Foundation Training. It begs the question whether medical students should be receiving more hands-on experience such as this throughout their clinical training in order to better prepare them for their future careers.

It is the post-pandemic era of medical education which is most worrying. The copious clinical exposure we experienced during the first UK national lockdown has dried up. Students are now expected to engage in ‘blended learning’ for the foreseeable future, with a much greater proportion of teaching delivered at the student’s rather than the patient’s bedside. And much like Ross et al., we can’t help but wonder, is this what is really best for the doctors of the future?

REFERENCES

   https://doi.org/10.18573/bsdj.170

   https://doi.org/10.1080/10872981.2019.1666538
   PMid:31526248

   https://doi.org/10.1111/jan.12509
   PMid:25134985

   https://doi.org/10.1016/j.nedt.2018.01.021
   PMid:29425738
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