

Undergraduate Paediatric Education and COVID-19

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“ Whilst many will remember the COVID-19 pandemic as a source of disruption, it is likely that it will also be viewed as a catalyst for the transformation of medical education that had been brewing for the past decade. ”

Lucey CR, Johnston SC. The Transformational Effects of COVID-19 on Medical Education. JAMA. 2020;324(11):1033-1034.

The Challenge and the Opportunity

The COVID-19 pandemic has had a **huge impact** on undergraduate medical education, with a switch to **online learning** and many **students having less time on clinical placements**. These changes bring **exciting opportunities** to **transform undergraduate paediatric education** through **honest reflection** (on what works and what doesn't,) **thinking creatively** and innovatively, and **working collaboratively** between medical schools from across the UK.

Learning from Students and Educators

Through the newly created **Paediatric GEMS** (national undergraduate paediatric) network, we asked medical students who did paediatrics pre-COVID 19 what their top learning experiences were and why, and **their ideas for transforming paediatric education**. We asked similar questions to educators. We received detailed responses from 56 students, from 7 different medical schools, and 22 educators from 10 different medical schools.

Top Learning Experiences...

Medical students and educators rated **seeing children in paediatric accident and emergency (or on a paediatric assessment unit)** as the **most useful educational experience**, followed by bedside teaching, simulation and attending outpatient clinics. Students found attending paediatric handovers, MDT meetings, ward rounds on the neonatal unit and community paediatric clinics least useful.

What Makes These Experiences So Valuable:

- **Being actively involved:** *'Any situation where you are expected to do something, anything, will lead to a more valuable learning experience.'*
- **Feeling welcomed and part of a team:** *'Giving students more responsibility to feel involved as opposed to feeling in the way.'* *'Feeling welcome.'* *'Feeling I was part of a team.'*
- **Learning from children and their families:** *'Spending time around children is extremely valuable.'* *'Patients are so memorable and help us remember conditions so easily.'*
- **Seeing common paediatric conditions:** *'Paeds ED is definitely the best learning, and able to do lots yourself.'* *'Vital in learning management of common paediatric emergencies.'*
- **Teaching from clinicians and receiving feedback:** *'A chance to practice with real-time feedback and seeing how it should be done.'* *'The doctors made a huge difference if they were willing to teach you and get you actively involved.'*

Conclusions

Medical students find **real-life experience in an emergency setting most exciting and useful for learning**. They value **'hands-on' clinical experience, feeling a valued part of a team, interacting with children, being actively involved**, and getting bedside teaching and feedback on clinical skills. These findings have been used to **design innovative placements** that maximise learning and student experience in paediatrics.