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The Impact of COVID-19 Pandemic on Clinical Teaching: A Clinical Educator's Perspective

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Dear Editor,

There is no doubt that the COVID-19 pandemic has had a drastic impact on medical students' clinical education. The inability to deliver face-to-face lectures, students' absences due to illness and self-isolation due to close contact, reduced social interactions with classmates, and reduced clinical exposure are amongst the main challenges that will have a lasting impact. On a positive note, students have received more attention from clinical educators with increased one-on-one teaching, small group teaching and targeted simulation sessions. The challenges outlined above necessitated clinical educators to adapt and enhance innovative teaching methods to meet medical students' learning objectives while aligning with government and public health guidelines.

Clinical teaching is best done at the bedside with 'real' patients as these interactions and dynamics are critical in students' learning. However, the COVID-19 pandemic has presented many organisational challenges for clinical educators, such as limiting the number of students in clinical sites for bedside teaching during the surge and patients' inability to attend the lecture halls and tutorial rooms for teaching. This has led to innovative teaching methods to include several online platforms, asynchronous and blended learning methods to provide educational content to many students. Online delivery of lectures can serve as an effective means of education by considering the factors that improve learning objectives from the online session, such as students' motivation, expectations, and employment of user-friendly technology². Furthermore, to facilitate clinical teaching, we used virtual reality glasses (RealWear) to bring the patient to the students and deliver the final medical curriculum. With patient consent, a student can take a patient history and examine a patient observed by a Consultant, while at other locations, a tutor and a whole class complement can see and hear everything as though physically present. The Consultant can teach, discuss the case and interact with a class full of students. The RealWear glasses allowed minimisation of direct contact but not limit our student's clinical experience and exposure.

As the access to the wards was interrupted due to the surge in cases, RCSI maintained its commitment to graduate doctors by consolidating their simulation teaching with the use of simulated patients', the introduction of simulated ward rounds, simulated medical, anaesthetics and surgical emergencies cases, and simulated intern on-call scenarios to facilitate students' learning. Feedback from students has been positive, citing the excellent value of hands-on teaching with one-on-one feedback and the opportunity for repeated practise to achieve competency.

Another impact of the pandemic on medical students' is mental health, which needs to be addressed by schools. Medical students are affected due to challenges such as uncertainties surrounding their education and future careers and the reduction of social interaction, leading to lonliness³. Channels of communication with students addressing academic and non-academic concerns are vital to tackle this significant issue.

Finally, the arrival of the COVID-19 vaccines has given a glimmer of hope for hands-on patient exposure to resume shortly. Meanwhile, adaptability, creativity, and innovation are essential for clinical education's success in the face of the pandemic's continuous challenges.

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