

Comparison of aspects of preregistration house officer training from traditional and new medical curricula

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As medical graduates from the new (problem-based learning) curriculum at University of Liverpool undertook their first post in the postgraduate clinical setting, this study investigated whether their views of preregistration training in the Mersey Deanery differed from the last cohort of preregistration house officers who had graduated from the traditional lecture-based medical curriculum at University of Liverpool.

BACKGROUND

In response to *Tomorrow's Doctors* (General Medical Council (GMC), 1993) most medical schools in the UK undertook major reforms of their curricula. The University of Liverpool introduced a new medical curriculum in 1996 using problem-based learning throughout. An important element in the establishment of the new curriculum involved investigating how graduates viewed their preregistration house officer (PRHO) training. In August 2001 the first University of Liverpool medical graduates from the new curriculum entered Mersey Deanery preregistration training.

Antepohl et al (2003) and Morrison (2003) have since highlighted the need to investigate further the effects that problem-based learning at undergraduate level has on doctors after graduation.

INTRODUCTION

The article published by Brown et al (2003) reported a study undertaken previously in the Mersey Deanery focusing on the teaching and learning experiences of PRHOs and their edu-

cational supervisors. The study included baseline questionnaire data relating to a subset of University of Liverpool medical graduates from the last cohort of the traditional curriculum. Identical questionnaires were distributed at the same time of the PRHO year in February 2002 and February 2003 to PRHOs from the first and second cohorts of University of Liverpool graduates from the new curriculum.

This article compares data from the three PRHO cohorts to explore whether teaching and learning experiences in the PRHO year differed among graduates from the old traditional lecture-based curriculum and those from the new problem-based learning curriculum.

Study populations

The study population consisted of Mersey Deanery PRHOs who had graduated from the University of Liverpool medical school in 2000 (traditional curriculum graduates), 2001 (first cohort of new curriculum graduates) and 2002 (second cohort of new curriculum graduates).

Study design

A questionnaire based on *The New Doctor* (GMC, 1997) recommendations was distributed by post to the individual cohorts in the spring of each PRHO year. All data were strictly anonymised and confidential. Questionnaire response rates were 58% (96 out of 166), 57% (92 out of 161) and 57% (93 out of 162) respectively.

Responses were invited on either a five-point Likert rating scale or on a yes, no or unsure basis. Non-parametric tests were undertaken to identify any significant differences between the responses from the three cohorts.

QUESTIONNAIRE RESULTS

The questionnaires explored four key themes that together shed light on the teaching and learning experiences of PRHOs in the Mersey Deanery. The themes were based on recommendations made in *The New Doctor* (GMC, 1997):

1. Help and advice
2. Feeling valued as part of the team
3. Discussions on topics of interest with consultant clinical supervisor
4. Development of a learning plan.

Help and advice

As PRHOs are still to complete their basic medical education they should be encouraged to seek help from a more experienced colleague, and this should always be available (GMC, 1997). As *Figure 1* illustrates, the new curriculum graduates were significantly ($P<0.01$) more likely to feel able to ask for help and advice.

Feeling valued as part of the team

Every post should provide the PRHO with a sense of being a valued member of the team (GMC, 1997). Sixty-seven (70%) PRHOs from the traditional curriculum felt valued as part of the team. Seventy-seven (84%) and eighty (86%) PRHOs from the first and second year of the new curriculum respectively felt valued as part of the team (*Figure 2*).

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Discussions on topics of interest with consultant clinical supervisor

According to the GMC, PRHOs, clinical supervisors and educational supervisors should discuss topics of interest that arise in various settings (GMC, 1997).

A significantly larger number of PRHOs from the new curriculum felt they had the opportunity to discuss topics of interest with their consultant clinical supervisor (Figure 3).

Development of a learning plan

The key principle in the assessment

process during the PRHO year is based on the setting of learning objectives at the beginning of each placement between the PRHO and his/her educational supervisor. Every educational supervisor is expected to issue the learning agreement and explain its purpose (GMC, 1997) to their PRHO soon after the post begins. As Figure 4 illustrates, there was no significant difference in the number of PRHOs from the three cohorts who had the opportunity to develop a learning plan with their educational supervisor.

DISCUSSION

Results indicate that overall PRHOs from the new curriculum had a more positive view of specific aspects their PRHO post. Significant improvements shown between the last cohort of graduates from the traditional curriculum and the first cohort of graduates from the new curriculum were maintained through to the second cohort. This study demonstrates that house officers who graduated from the new curriculum at the University of Liverpool were more likely to ask for help and advice from senior colleagues. This corroborates the work of O'Neill et al (2003) who found that graduates from the new integrated curriculum at the University of Manchester were better at asserting their right for support than previous house officers.

There were, however, aspects of PRHO training that had not significantly improved.

The number of PRHOs who had the opportunity to develop a learning plan with their educational supervisor did not significantly improve over the three cohorts of the study. This suggests that PRHOs who have graduated from the new curriculum at University of Liverpool may have the skills required to undertake their role as effective self-directed learners but barriers still remain in the postgraduate clinical setting that limit PRHOs' ability to progress as experiential learners.

It is vital that the postgraduate educational infrastructure in each trust is able to facilitate PRHOs' progress. This relies heavily on the skills and commitment of educational supervisors to facilitate their experiential learning and on each trust to deliver a formal education programme that complements learning in the clinical setting.

The implementation of *Modernising Medical Careers* (Department of Health, 2003) will place pressure on local NHS trusts to maintain high service commitments as well as facilitating and delivering high quality education for postgraduate medical trainees.

Figure 1. Responses to question 'Do you feel you are always able to ask for help and advice from your colleagues?'.

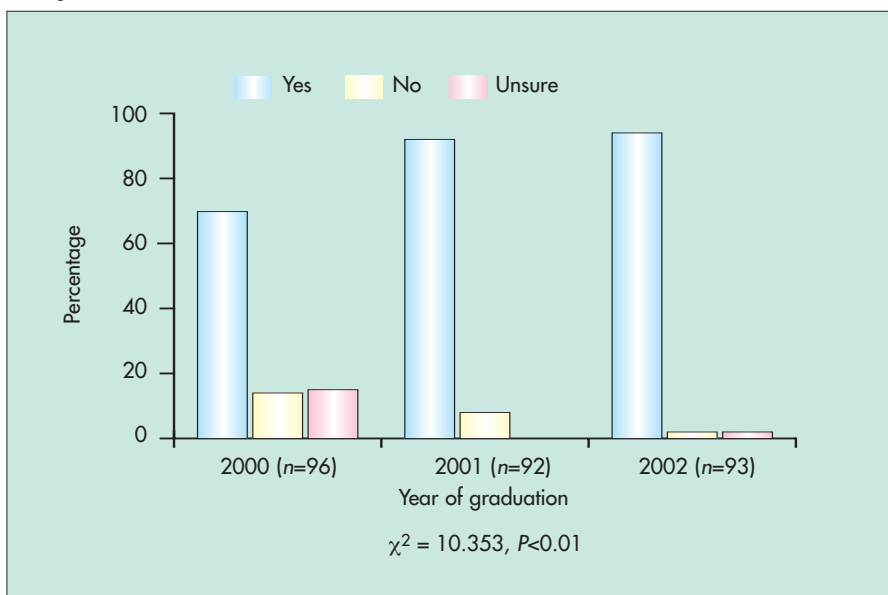
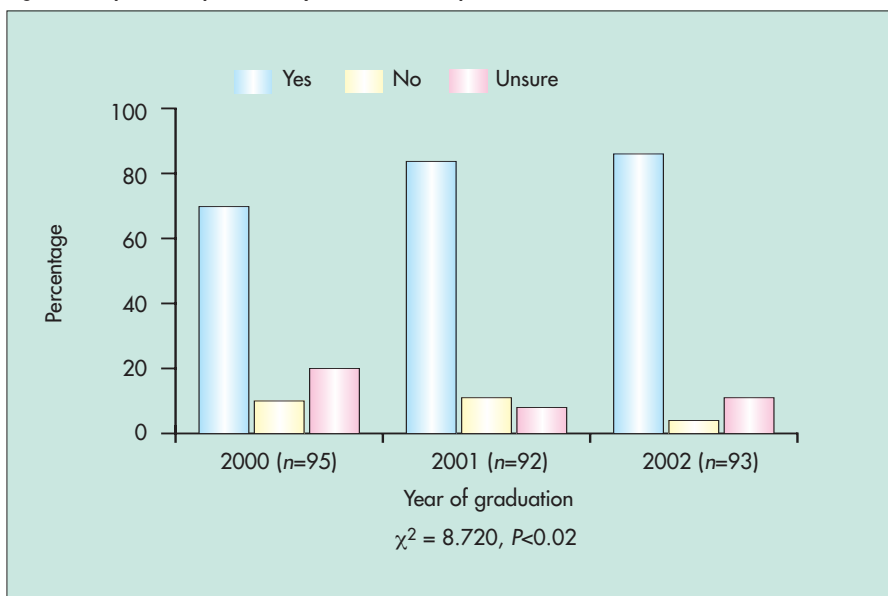


Figure 2. Responses to question 'Do you feel valued as part of the team?'.



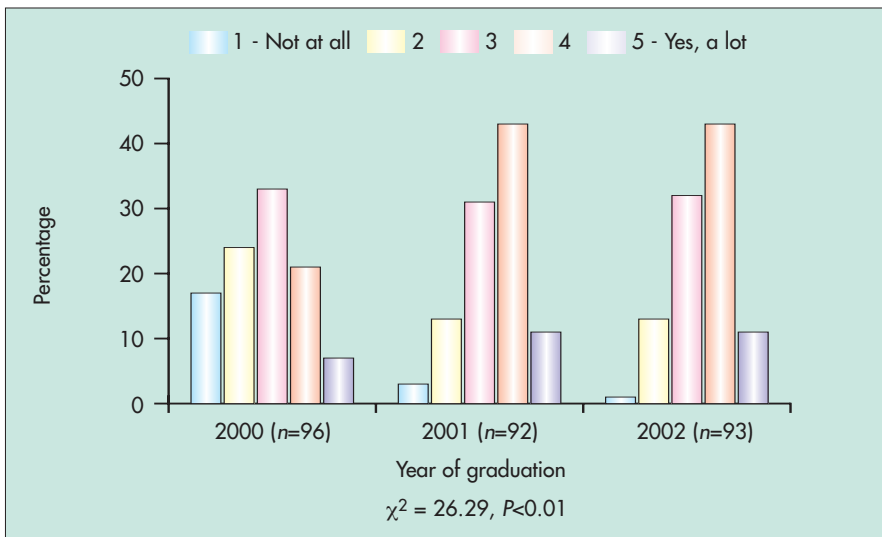


Figure 3. Responses to question 'Have you had the opportunity to have discussions on topics of interest that arise during clinical work with your consultant clinical supervisor?'

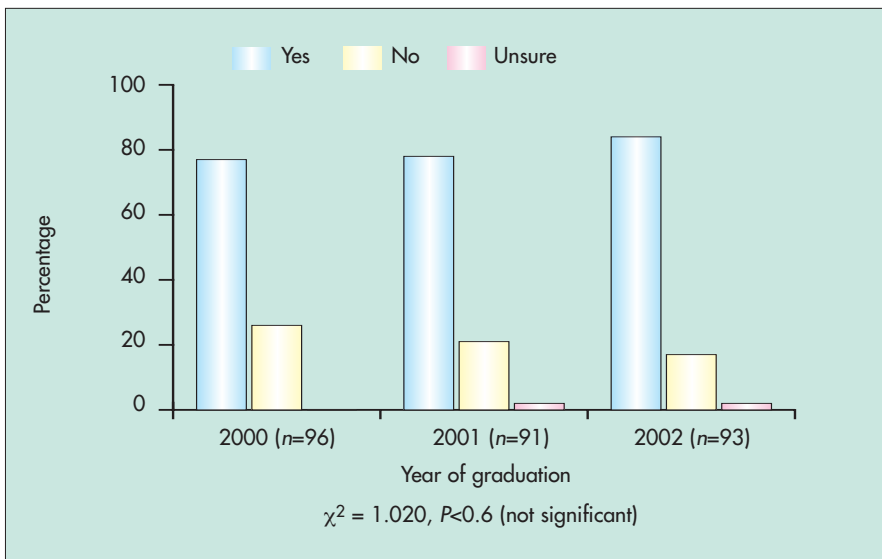


Figure 4. Responses to question 'Have you had the opportunity to meet and develop a learning plan with your educational supervisor at the beginning of your post?'

KEY POINTS

- Preregistration house officers (PRHOs) from the new curriculum at Liverpool Medical School are more likely to ask for help and advice from their senior colleagues, feel valued as part of their team and feel they have more of an opportunity to discuss topics of interest with their consultant clinical supervisors.
- However, there has been no significant increase in the number of PRHOs who meet with their educational supervisors at the beginning of their post to develop a learning plan.
- The successful implementation of foundation programmes across deaneries will be based on regular meetings between trainees and their educational supervisors.

Further scrutiny will be placed on the educational provision of PRHOs as more emphasis is placed on core generic skills and continuous assessment. The successful implementation of foundation programmes across deaneries will be based on regular meetings with educational supervisors. This study demonstrates that despite PRHOs becoming more assertive in asking for help and advice, and feeling valued in their team, there are still PRHOs who are not meeting their educational supervisor at the start of their post to develop a learning plan to set objectives for the forthcoming year.

The first meeting between the educational supervisor and the PRHO establishes the education and training framework, and is a fundamental requirement that allows the appraisal process to develop. As the foundation programme is established nationwide from August 2005 it is vital that educational supervisors and foundation programme trainees meet and place sufficient emphasis on setting learning objectives. **HM**

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