Initiatives to improve teaching skills in medical students

As medical students are increasingly involved as educators earlier in and to the benefit of their own education, developing their teaching skills is desirable. In this study, Marton and colleagues conducted a search of the literature with the goal of identifying characteristics and outcomes of programmes to develop teaching skills in undergraduate medical students.

A search of medical literature databases highlighted three types of initiatives. The majority of initiatives used subjective self-evaluation surveys, principally reporting participants’ self-perceived improvements in teaching skills as well as other areas. Objective, quantitative teaching-related outcomes were rarely reported. Whilst some programmes have subjectively shown improvements in teaching skills in undergraduate medical students, further study is required to establish objective outcomes of such initiatives.


Enriching self-explanation with examples and prompts

Chamberland et al. report on their study considering whether adding examples and prompts increased the effect of self-explanation on the learning of clinical reasoning. Medical clerks self-explained while solving clinical cases, then listened to a resident’s example of self-explanation with or without prompts. In comparison to a control group, self-explaining alone improved students’ performance on related cases, but listening to the examples with prompts resulted in even greater improvement. Listening to the examples seemed to prime cognitive engagement during self-explanation, and prompts may serve to maintain a level of activation that helps to foster a deeper processing of knowledge.


Changing OSCEs for better learning

Recognising that some characteristics of assessments exert a strong influence on how students study, Lafleur and colleagues, undertook a study to compare the benefits of whole-task and part-task assessments in objective structured clinical examinations (OSCEs). They undertook a randomised controlled experiment, filming medical students as they prepared for an OSCE, to determine whether an OSCE containing whole tasks, as opposed to part tasks, increases the use of diagnostic reasoning. Their qualitative and quantitative results indicated the benefits of Hypothesis-Driven Physical Exam (taken as a model of whole-task OSCEs) over ‘traditional’ OSCEs.


Recognising early signs of residents’ depression

Depression among residents is a critical issue. There are general preventive interventions for depression, such as restriction of working hours. Unfortunately, many residents still fall into depression. In this research, Ito et al report that the Sense of Coherence (SOC) score, which is one indicator of stress coping ability, might be a predictor of future depression among residents. They posit that by evaluating the SOC score before the start of clinical training, high risk students could be identified thus making it possible to provide them with appropriate support. The value of this early intervention could be seen in benefits to the medical trainees, as well as the medical educators and patients.