

Who teaches basic procedural skills: perspectives of medical undergraduates in a university in Sri-Lanka

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Learning procedural skills as a medical undergraduate has come a long way, as task trainers and simulators are now omnipresent. However, wide variations in procedural competence is observed among graduating doctors and medical students. Whether skills laboratory training has superseded bedside teaching or is adjunct to it, is an ongoing investigation. Furthermore, who is responsible for student education in the procedural skills domain, and how students learn in the current context are yet unclear. In this study, we sought to characterize the experience and opinions of medical students on procedural skills training. Six focus-group interviews were conducted among medical students who were undergoing clinical training, at the Faculty of Medicine, University of Kelaniya, Sri Lanka from July-October 2020. The interviews were recorded, transcribed, and analyzed for recurring themes. There were 18 third-year medical students, 17 fourth-year students, and 16 fifth-year students. Two focus group discussions were held per student from each academic year. Opinions on the learning environment, and learning methods for basic procedural skills, as well as who serves as the primary teacher, emerged prominently from the data. Third-year students reported simulation as the primary method of education. Bedside learning emerged prominently among fourth and final-year students. At the bedside, most students learn procedures through observation of health professionals. Nursing officers and intern medical officers were recognized as primary teachers by third and fourth-year medical students, whereas intern medical officers and registrars were identified as the primary teachers by the final-year medical students. The majority appreciated the skills laboratory training in developing procedural skills. Peer-assisted learning emerged prominently among discussions with all three academic years as a preferable mode of honing procedural competence among medical students. This study suggests that medical students recognize the utility of both simulation and bedside teaching in procedural skills training. They valued the contribution of nursing officers, interns, and registrars in their education. The student opinion varied in the degree to which they think simulation is or should be incorporated into learning procedural skills. Students visualize the capacity peer-assisted learning holds in improving procedural competence among medical undergraduates.

Keywords: Procedural training, Competence, Bed-side teaching, Skills lab, Medical education

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