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Are patients willing participants in the new wave of community-based medical education in regional and rural Australia?

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Are patients willing participants in the new wave of community-based medical education in regional and rural Australia?

Abstract
Community-based medical education is escalating to meet the increased demand for quality clinical education in expanded settings and patient participation is vital to the sustainability of this endeavour. This study aimed to investigate patients' views on being used as an educational resource in medical student teaching, and whether they are being under- or over-used.

Keywords
willing, medical, regional, patients, australia, education, community, rural, participants, wave

Disciplines
Medicine and Health Sciences

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O 48

Are patients willing participants in the new wave of community-based medical education in regional and rural Australia?

Hudson JN, Weston KM, Farmer EA, Ivers RG, Pearson RW

Objective:
Community-based medical education is escalating to meet the increased demand for quality clinical education in expanded settings and patient participation is vital to the sustainability of this endeavour. This study aimed to investigate patients' views on being used as an educational resource in medical student teaching, and whether they are being under- or over-used.

Design, setting and participants:
All patients attending 8 rural and 11 regional general practices over 18 teaching sessions provided consent for student involvement, and to complete a pre and post-consultation survey. The survey gathered data on their perceptions, expectations and acceptance of medical student involvement in consultations.

Results:
Ninety-nine percent of patients (N=118) who consented to medical student involvement completed pre-consultation surveys, with 83% (N=100) completing post-consultation surveys. Patients were overwhelmingly positive about their doctor and practice being involved in student teaching, and felt they themselves played an important role. Pre-consultation, patients expressed reluctance to allow students to conduct some or all aspects of the consultation, independently. However post-consultation, they reported they would have accepted higher levels of involvement than actually occurred. Regional/rural students were involved in patient consultations to a higher degree than previously reported for urban students.

Conclusions:
Patients in regional and rural settings are willing partners in junior medical student skill development. Our study extends the findings from urban general practice that patients are underutilised partners in community-based medical training. The support of patients from regional and rural settings should facilitate the expansion of primary care-based medical education in these areas of workforce need.

O 49

Cognitive apprenticeship & authentic assessment within high fidelity simulated clinical environments: an education framework for bridging the gap between higher education and practice settings

Yvonne Jarvis, Dr Keith Weekes and Lesley Benson

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Brief Biography:
Yvonne worked as a staff nurse on an acute medical ward before moving into nurse education in 2000. Her role involves managing the clinical simulation centre within the faculty of health, sport and science and is actively involved in developing curricula to support learning through simulation.

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Theme/Topic:
Transfer factors: from simulation to reality.

Background:
A key driver behind the design and employment of authentic learning environments and authentic assessment is the requirement to bridge the perceived gap that exists between the processes of instruction, learning and assessment (Boud 1990, Gulikers et al 2004). Nowhere is this more critical than in the health care professions where learning and assessment schedules must support and measure the construction, synthesis and meaningful application of the knowledge, problem-solving and professional skills that underpin safe professional practice.

Previous & current work being undertaken in the field of simulation: Following 16 years of research and development of computer based authentic