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Does clinical placement location affect medical student exam performance in psychiatry?

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Abstract

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Does Clinical Placement Location Affect Medical Student Exam Performance in Psychiatry?

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Background: One of the many challenges in managing student clinical placements is trying to ensure equity of opportunity and experience in regards to meeting the curriculum objectives. Students often complain that they have been disadvantaged by their clinical placement due to variations in patient population and acuity, the availability of consultants, registrars and other health care staff to guide learning, and the presence of other students from all disciplines who compete for opportunities.

Objectives: To identify if there is a relationship between psychiatry placement location in the Illawarra Shoalhaven Local Health District (ISLHD) and end of year psychiatry exam results for medical students from the University of Wollongong.

Methods: We compared psychiatry oral and written exam results for six cohorts of students, from 2009 to 2014, across four different placement locations in the ISLHD ($N = 450$) using one-way multivariate analysis of variance.

Findings: The multivariate effect of placement location was not significant (Pillai's Trace = .013, $F(6,892) = .994$, $p = .428$). Univariate ANOVAs on the individual outcome variables were also non-significant (written exam scores, $F(3, 446) = 1.373$, $p = .250$; oral exam scores $F(3,446) = .789$, $p = .501$).

Conclusions: Maintaining the quality and consistency of clinical placements will always be a challenge due to limited and varied opportunities, student numbers, and the dynamic nature of both the workforce and the patient populations. However, based on our findings, within our region there is no difference in placement location in regards to end of year psychiatry exam results.