Do you know how COVID-19 is changing general practice/family medicine education?

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Dear Editor

The COVID-19 pandemic is causing enormous changes in society and health care [1]. Inevitably, this impacts on the education of health professionals. For General Practice/Family Medicine (GP/FM) education this means adjustments on three levels: 1) Bachelor and Master studies (Basic Medical Education (BME)); 2) postgraduate education (Speciality Training (ST)); 3) Continuous Medical Education (CME). Currently, most European medical universities are closed. Solutions, such as distance learning, are rapidly being sought. However, these activities face obstacles. It is uncertain whether students and trainees will reach all predefined competencies during this pandemic [2]. For 10–15 years, medical faculties and training organisations have been implementing ‘blended learning’, using online training alongside traditional teaching activities. But many face-to-face activities remain, e.g. classroom teaching, small group sessions, skills training with or without simulated patients and in clinical settings [3]. These activities are not always easy to replace, especially training in the authentic clinical workplace context.

We lack systematic knowledge of the type and extent of change occurring in GP/FM education in Europe as the COVID-19 pandemic spreads. The European Academy for Teachers in GP/FM (EURACT) is setting up a study to answer the following research questions, with respect to BME, ST and CME, in GP/FM education across Europe: 1) What are the problems being faced? 2) How has education changed? 3) What are the results of these changes, i.e. how is the integrity of GP/FM education affected and what is the perceived impact on learning outcomes?

EURACT brings together experts who have above-average knowledge of their country’s education systems at various levels. Therefore, EURACT has the potential to obtain a reliable picture of the impact of COVID-19 pandemic on education. We plan cross-sectional research that will be repeated monthly. This enables us to explore the dynamics of education change in the different pandemic phases using the ‘key informant’ method [4]. At least two key informants from each European country will be invited to participate. To make a valuable contribution, these experts must have a good knowledge across the three GP/FM training levels and ideally, hold a formal, important position in their country’s education system. The EURACT Council Members (as representatives of their country) will select the ‘key informants’ using pre-defined criteria. They will be invited to respond to an English online questionnaire using questions with predefined answers and open-ended free text ones.

The study aims to gain insight into, and learn from, the most important changes in GP/FM education resultant on the COVID-19 pandemic. It will highlight good practice and enable European countries to support each other through this crisis. It may well reveal opportunities to improve our current educational practices.

Yours sincerely,

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References


