

1st year medical students' understanding of Professionalism

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Professionalism is a core medical education theme. Before their formal teaching begins, our first year students are asked “what makes a good doctor”? Working in small groups they generate a year group list of the attributes of ‘a good doctor’. Do our students’ beliefs align with the standards set by medical professional bodies?

This study aimed to compare our students’ responses with two key documents: “Good Medical Practice” (GMP) ¹ and “Advancing Medical Professionalism” (AMP) ². Data generated over thirteen years was analysed to identify any changes in values over this period.



What was done

- A list of student-generated beliefs was available for 10 year groups over a 13 year timeframe
- A master list of attributes was generated and, where appropriate, responses were merged
- Each year’s responses were mapped against attributes described in GMP and AMP
- The following were identified: frequently occurring beliefs, changes in patterns of beliefs and any discordance with the guidance

Outcomes

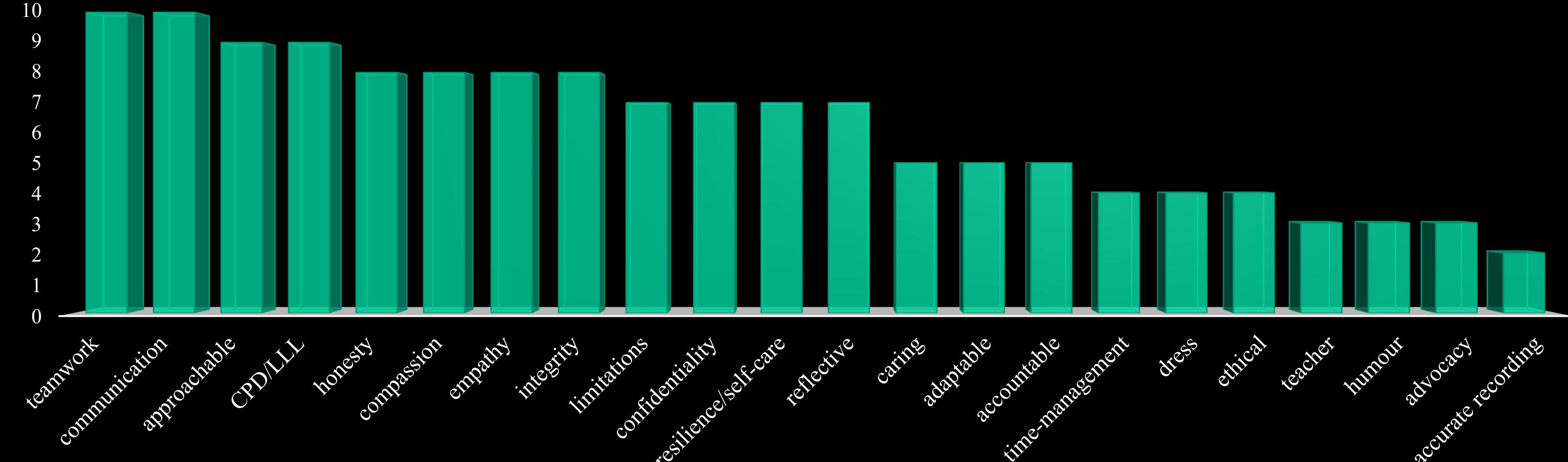
- Analysis revealed 227 terms
- 117 terms could be mapped against GMP
- Concordance with AMP was 48/64

Beliefs concordant with GMP

manages-uncertainty
 manages-failure
 Self-directed-learner
 read-between-lines
 responsibility-for-mistakes
 caring
 Impartial
 Appropriate-behaviour
 diagnostic-skills
 non-judgemental
 Well-practiced
 Mindful-town-health
 patient-comfortable
 decision-maker courteous
 problem-solving
 relationships
 Well-round
 Respecting-patient
 methodological
 EBM resourceful
 Addiction-free
 reflect-on-errors
 thirst-for-knowledge
 seek-help
 explain-well
 active-listener
 self-critical
 realistic
 self-assessment
 reflective
 dependable
 ethical
 rational
 Humble
 confidentiality
 listener
 attentive
 Healthy
 competence
 professional
 supportive
 Kind
 team-player
 unbiased
 discipline
 Respectful
 skilled
 Decorum
 accountable
 up-to-date
 thorough
 Inclusive
 reliable
 Appreciating-others'-skills
 co-operative
 holistic
 Personable
 Persistent
 honest
 IT-competent
 Considered
 appropriate-involvement
 admit-error
 approachable
 limitations
 Helpful
 self-reflection
 Loyalty
 Knowledgeable
 integrity
 Warmth
 CPD
 Non-dominating
 Not-discriminating
 scientific-sound
 Stress-management
 Bedside-manner
 responsible
 Not-prejudiced
 Social-awareness
 non-discriminating

GMP values not identified by students

Transfer-practice
 Conscientious-objective
 inquiries
 Register-GP
 Staff-supervision
 Accessible
 immunised
 Interests-influencing-treatment
 Safety-culture
 mentoring
 Trust-broken
 Cooperate-inquiries
 resources
 Self-care
 Medicine-compatibility
 accurate
 conviction
 Support
 Quality-assurance
 Quality-consent
 GMC-Guidance
 Factual-advertising
 Honest-evidence
 Treat-if-risk
 Concern-culture
 guidelines
 Honest
 Conflict-interest
 Patient-partnership
 Delegate-well
 Palliative-care
 Emergency-help
 Indemnity-insurance
 Disabled-needs
 Family-friends
 Reter-when-needs



Conclusions

Year 1 Medical Students consistently identified a wide range of professional values. There was discrepancy in significant areas between students’ beliefs and key professionalism documents.

It is hoped that as students progress through medical school they will develop a broader and more sophisticated understanding of professionalism.

Future Developments

Repeat this exercise with our final year students to prompt reflection on how their understanding of this core concept has evolved to inform curriculum development.

References

1 GMC Good Medical Practice 2014 <https://www.gmc-uk.org/ethical-guidance/ethical-guidance-for-doctors/good-medical-pract> [Accessed Feb28 2019]

2 RCP London 2018 <https://www.rcplondon.ac.uk/projects/outputs/advancing-medical-professionalism> [Accessed Feb28 2019]