

Patients at the heart of Medical Education: A bird's eye view from the patients' perspective

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Discussion and targets

Medical education

Recommendations from the GMC, BMA and Picker Institute.

- ◆ Foster patient and public involvement through innovative approaches^{c,d}.
- ◆ Cultivate patient-centred skills and behaviours in “tomorrow’s doctors”^c.
- ◆ Transform the doctor-patient relationship into “patient partnership” - a bipartite active personal engagement^d.
- ◆ Patient as teachers - priming “users” to shape the future medical workforce^{c,d,e}.

Introduction

Birdshot chorioretinopathy is a chronic posterior uveitis, often bilateral and always progressive - causing great distress and visual impairment. To stem the merciless destruction, Birdshot requires long-term aggressive treatment, in which the doctor-patient relationship is crucial to maintain a high level of care and patient satisfaction.

With a unique partnership between three major London and Paris hospitals, the Birdshot Uveitis Society (BUS) and UCL medical school, a patient day was organised in September 2010 to promote collaboration and mutual learning outside the consultation room.

Medical students were invited to be involved in the patient day - embracing the focus of modern medical education which endeavours to promote patient-centeredness and active engagement of the medical students in order to foster empathy, professional behaviour and motivation. These key factors are considered and discussed in this poster.

Features of patient-centredness^a

- ◆ Explaining the disease and the illness experience.
- ◆ Understanding the whole person - biopsychosocial perspective.
- ◆ Finding common ground regarding management - therapeutic alliance.
- ◆ Incorporating prevention and health promotion.
- ◆ Enhancing an egalitarian doctor-patient relationship.
- ◆ Being realistic about personal limitations and issues such as the availability of time and resources.

Attitudes and empathy

At medical school, students’ attitudes and empathy tend to erode under the pressures of academic achievement and time. Patient-centred education and active involvement in longitudinal projects such as patient days are able to enforce positive attitudes and mindful learning.

Clinical reasoning

Continuous reflection and rational examination of student beliefs, assumptions and actions may improve management of situations where equality, diversity or ethical dilemmas arise. Self-criticism and feedback from patients helps to establish a base for critical thinking.

Motivation and engagement

Student involvement in patient days uses narratives to provide a backdrop for the learning material. Following a holistic biopsychosocial perspective, patients are viewed as idiosyncratic personalities with unique contexts. Student commitment and concrete aims further motivate learning.

Professional behaviour

Inviting medical students to be true partners and appreciated members of a healthcare team enable them to develop valuable professional skills. It also fosters good clinical practice by identifying role models and increasing appreciation of the vast diversity of professional roles and responsibilities.

Student interpretation of Birdshot following the patient day.

Consent for publishing and public display was obtained for the drawing thanks to Jenny Wright.



Communication

Successful communication (doctor-patient or cross-disciplinary) relies on an open dialogue with mutual respect. In addition, confidence and self-awareness are needed in patient-centred care to feel safe in one’s designated role and to enable the formation of an egalitarian doctor-patient relationship.

Long-term conditions

17.5 million adults in the UK live with a long-term condition - all with an increased need of multidisciplinary care and shared consultation style. The current shift in patient-centred care towards self-management and patient empowerment creates a therapeutic alliance which improves outcome.

Barriers

Student involvement in patient days is a creative educational initiative that faces a range of barriers. Together with the NHS, medical schools need to negotiate pressures of curricular focus, efficacy and service delivery. Scarce evidence base and practical considerations currently hamper implementation.

Conclusion

Guidelines from leading bodies in medical education are increasingly promoting patient-centred education in order to foster the notion of an egalitarian doctor-patient relationship, empathy and mindful learning. It has been recognised that patient-centred education is the cornerstone of high-quality patient-centred care and this professional behaviour can only be cultivated through active student involvement coupled with direct patient engagement in medical education.

As illustrated by the Birdshot patient day, many of the objectives set out by the BMA, GMC and Picker institute may be met by this innovative approach which ultimately aims to enhance fundamental professional skills and attitudes of future doctors.

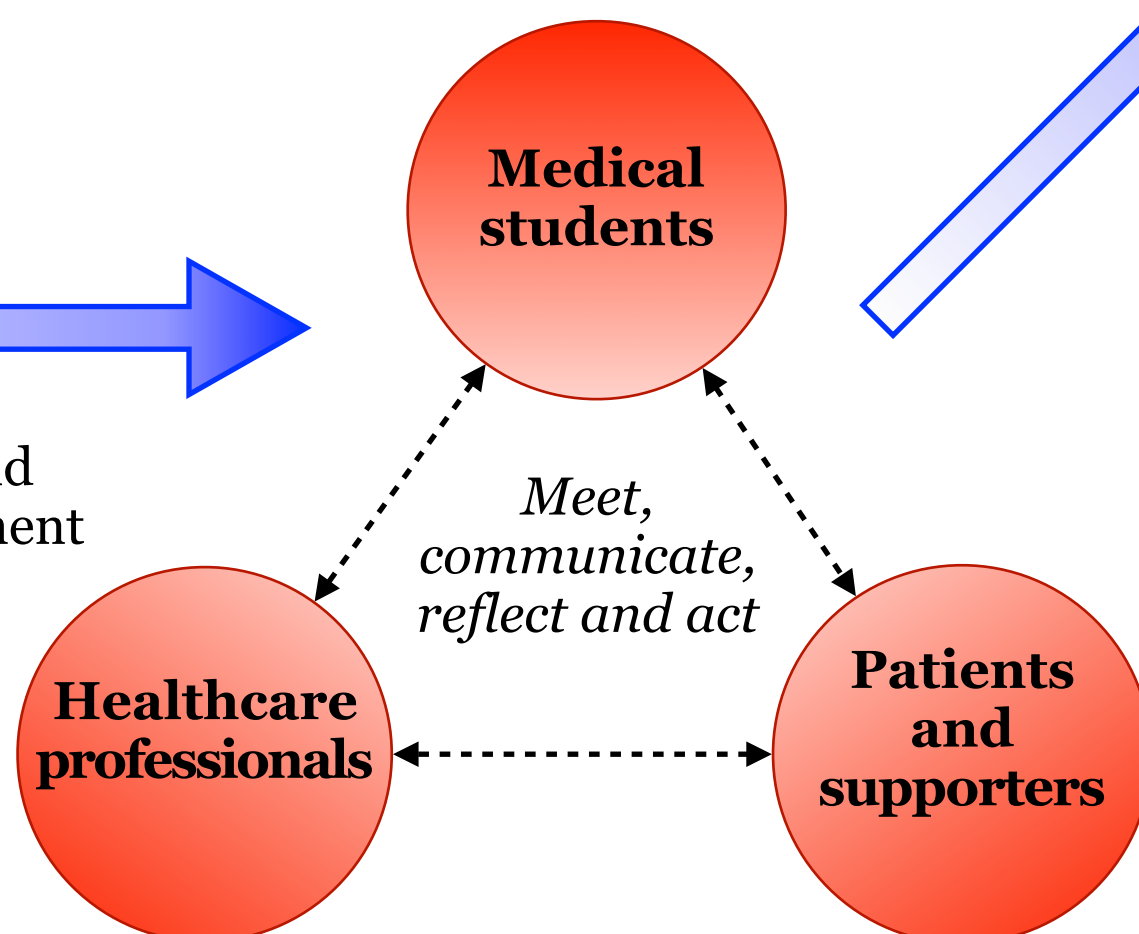
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Objectives of the Birdshot patient day

- ◆ Reduce sense of isolation of patients with this rare disease.
- ◆ Raise the profile of the disease.
 - ◆ Allow a two-way exchange of information between patients and healthcare professionals.
- ◆ Help to obtain better visual outcome for patients.
- ◆ Provide a base for research.

Method

Patient day with widened student and professional involvement



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