

Recognising, valuing and supporting clinicians who teach:

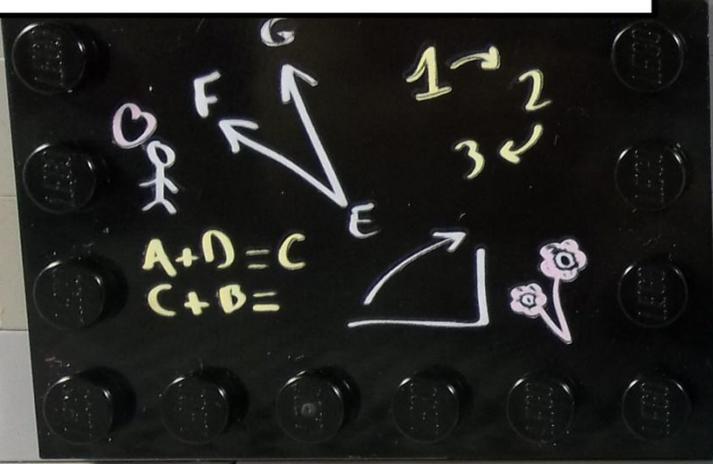
Can we do it better?

Claire MacRae, PhD student, University of Edinburgh

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Dr Terese Stenfors, Karolinska Institutet

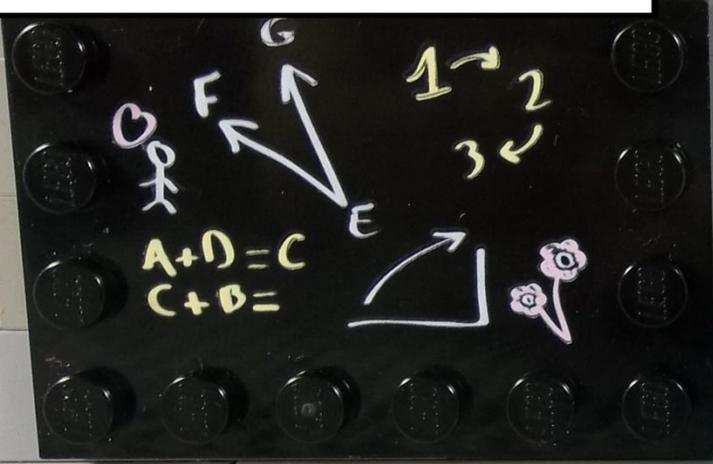
THE PROBLEM:



I HONESTLY
FEEL LIKE GIVING
UP TEACHING



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I HONESTLY
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WHY???

(AND WHAT CAN WE DO ABOUT IT?)

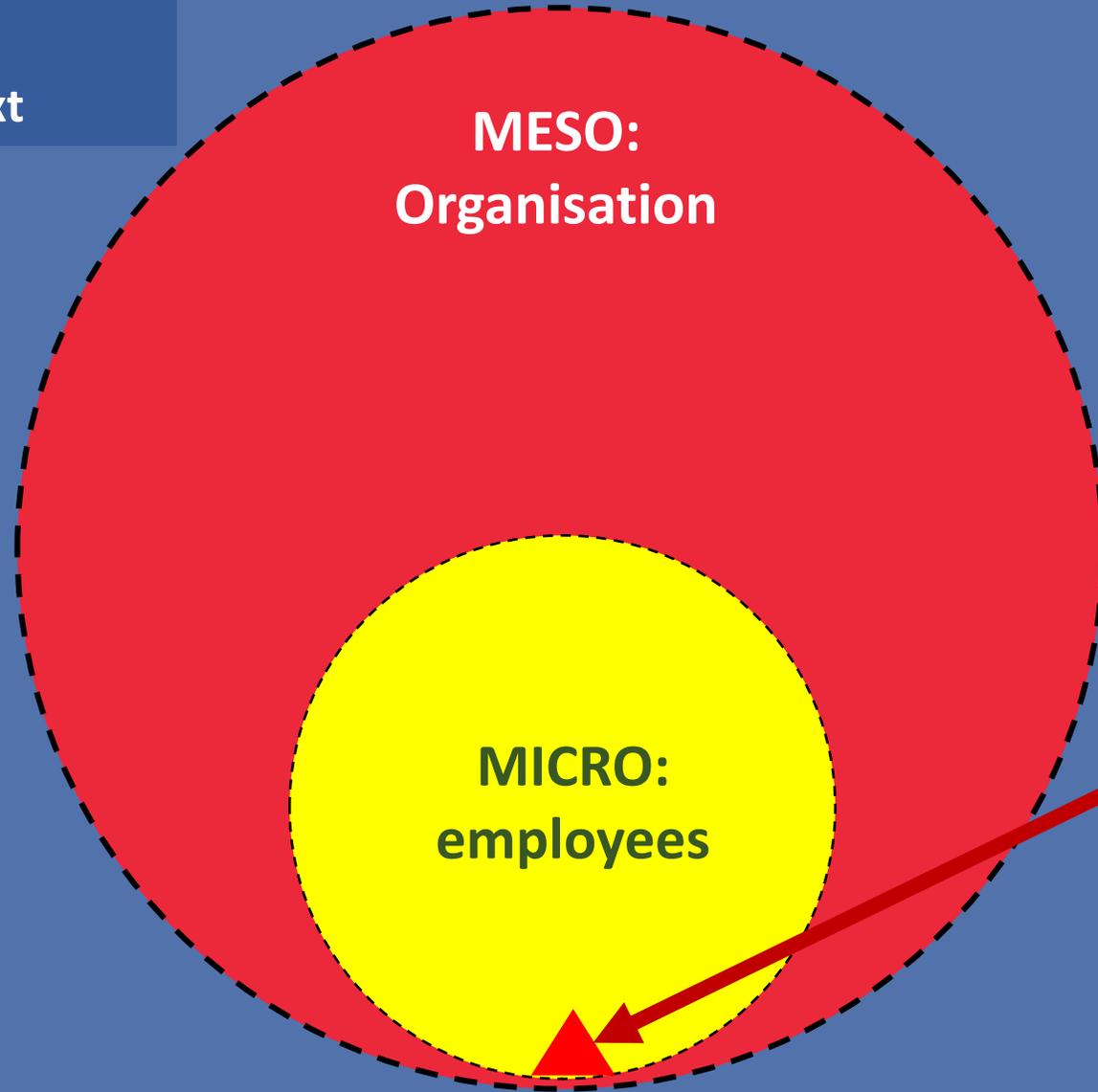
MACRO:
Institutional &
regulatory context

MESO:
Organisation

MICRO:
employees

“The problem”

Wider social, cultural & political context



Institutional & regulatory context

**CASE STUDY:
CONFIGURATIONAL
ANALYSIS**

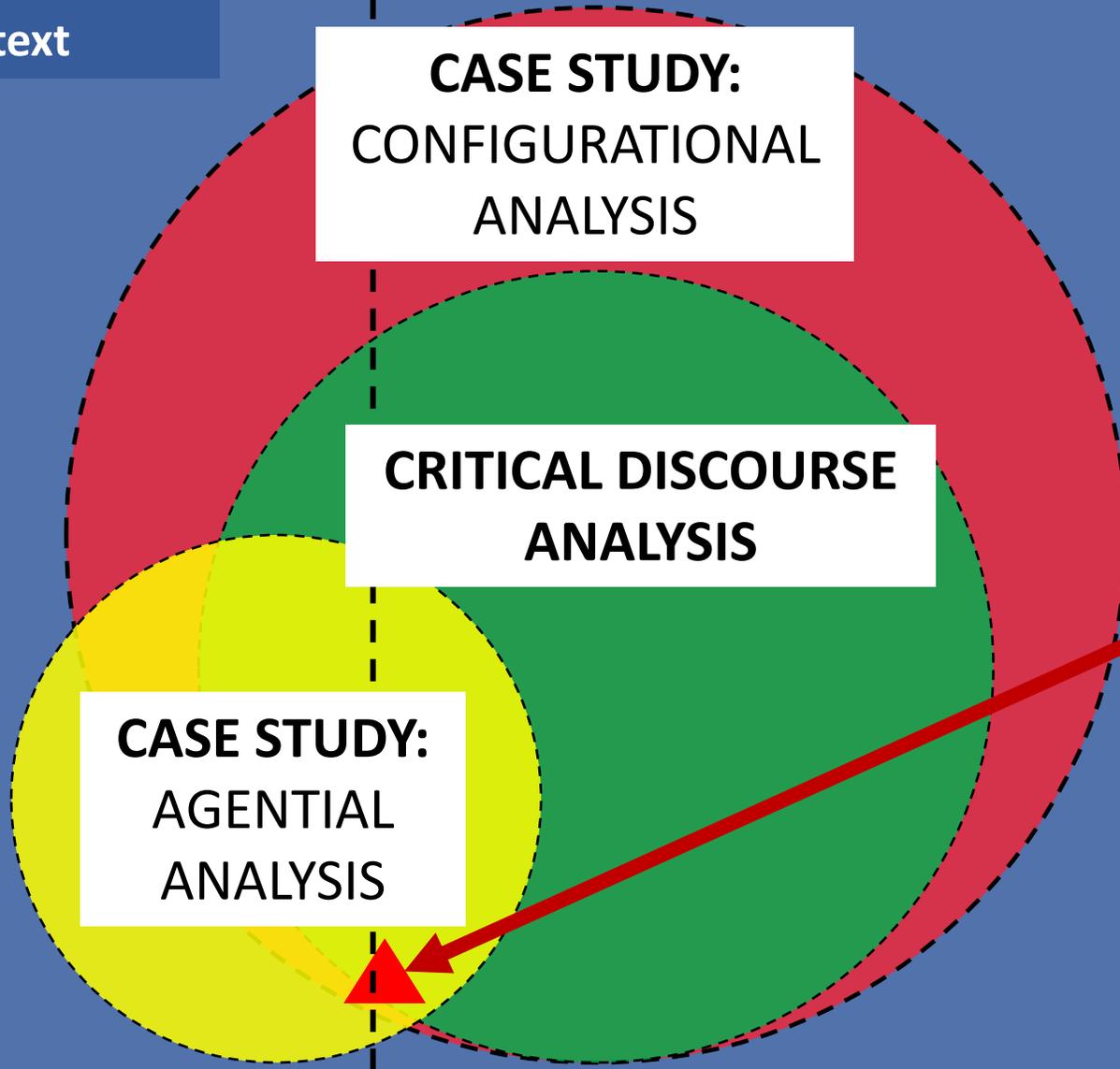
**CRITICAL DISCOURSE
ANALYSIS**

**CASE STUDY:
AGENTIAL
ANALYSIS**

Phenomenon
of interest

**CASE STUDY:
FIELD ANALYSIS**

Wider social, cultural & political context



Institutional & regulatory context

'What medical schools do'

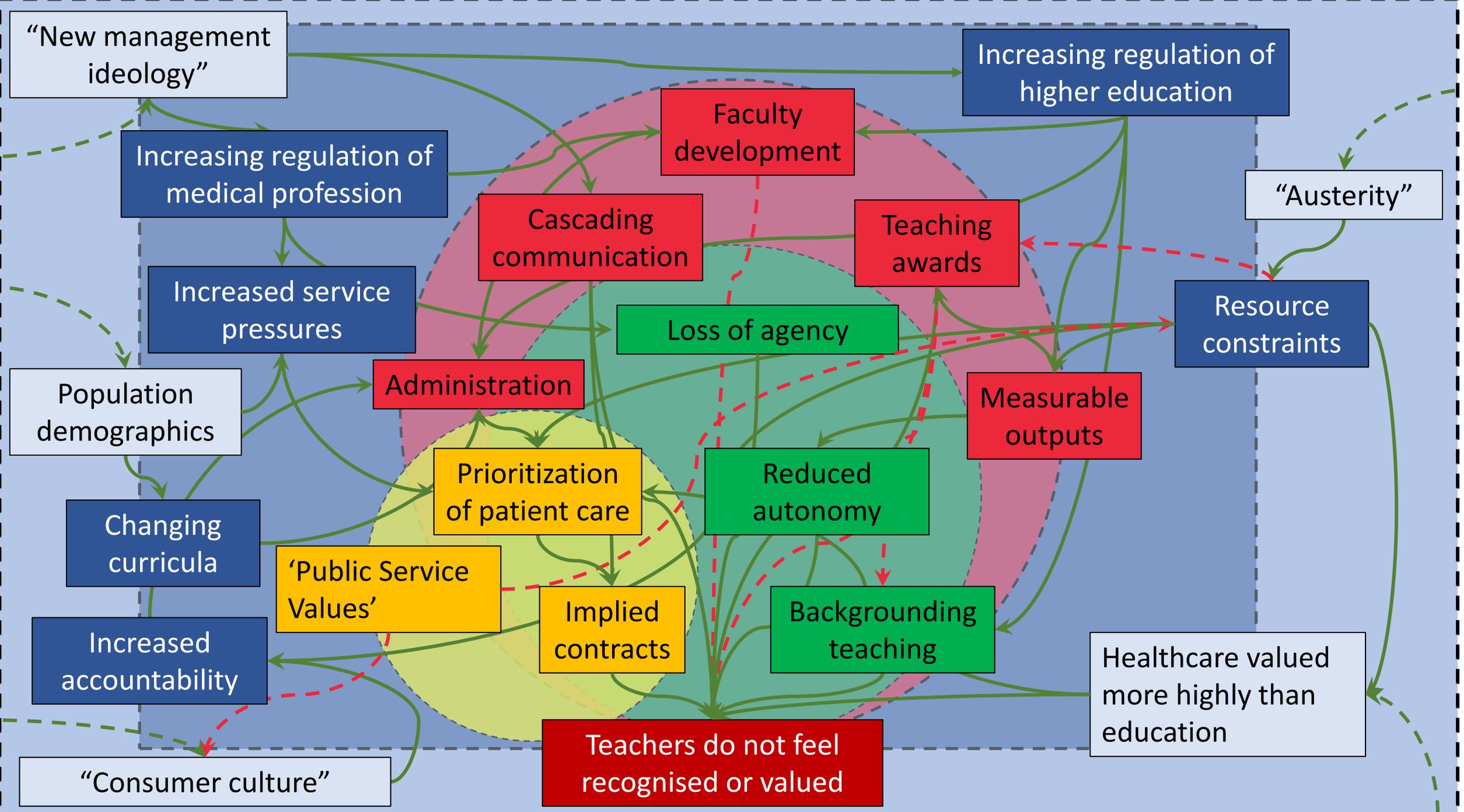
'What medical schools say'

'What teachers think / say / do'

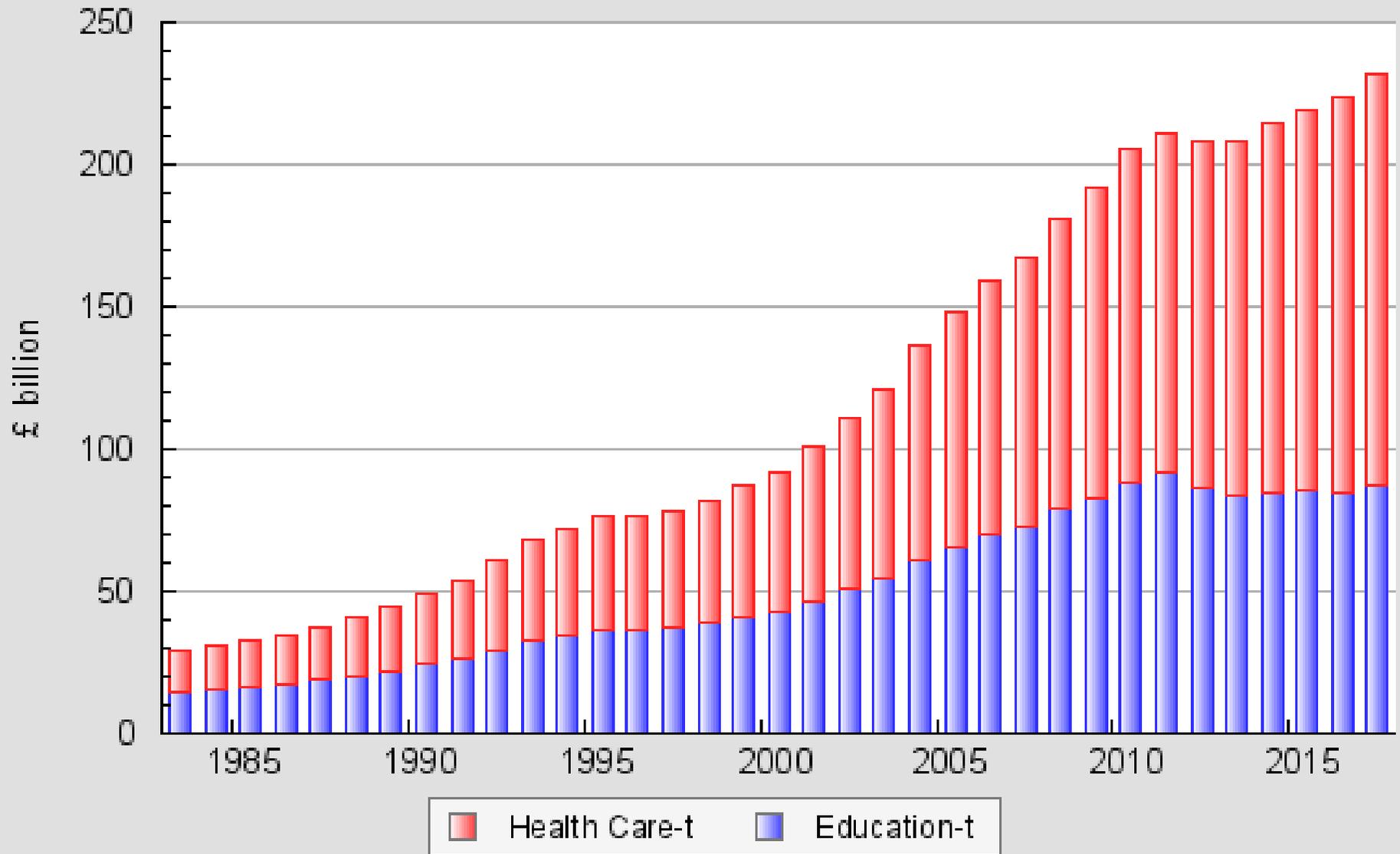
Value of clinical teaching

Wider social, cultural & political context





Public Spending On Health And Education United Kingdom from FY 1983 to FY 2017



“sterility”

TEACHERS ARE VALUED LESS THAN DOCTORS...



...AND THE JOB IS PERCEIVED AS HIGH-EFFORT, LOW-REWARD.

“New management ideology”

“Those who can do; those who can't...”

Increasing regulation of higher education

Increasing regulation of medical profession

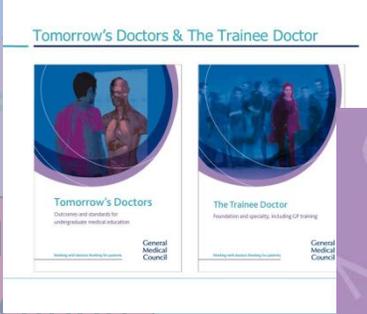
“Austerity”

Increased sector pressure

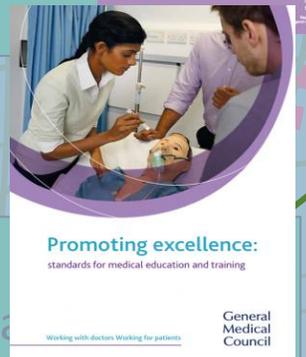
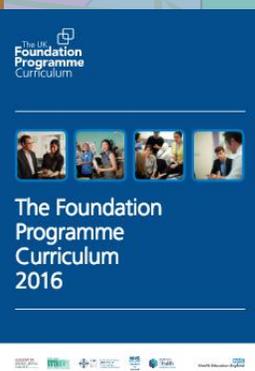
QAA Reviewed
Quality Assurance Agency for Higher Education

Resource constraints

Population demographics



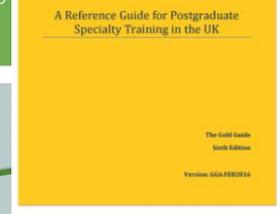
Changing curricula



Measurable outputs

Increased healthcare funding

Increased accountability



Applied contracts

Backgrounding teaching

Doctors paid more than teachers

Healthcare valued more highly than education

“Consumer culture”

Teachers do not feel recognised or valued

“New management ideology”

“Those who can do; those who can't...”

Increasing regulation of higher education

“Austerity”

Increasing regulation of medical profession

QAA Reviewed
Quality Assurance Agency
for Higher Education

Increased service pressures

Resource constraints

Population demographics

Implementing the NHS consultant contract in Scotland

Good medical practice

Tomorrow's Doctors & The Trainee Doctor

Recognising and appraising trainers: the implementation plan

Scottish Funding Council

The Foundation Programme Curriculum 2016

Promoting excellence: standards for medical education and training

A Reference Guide for Postgraduate Specialty Training in the UK

Changing curricula

Measurable outputs

Increased healthcare funding

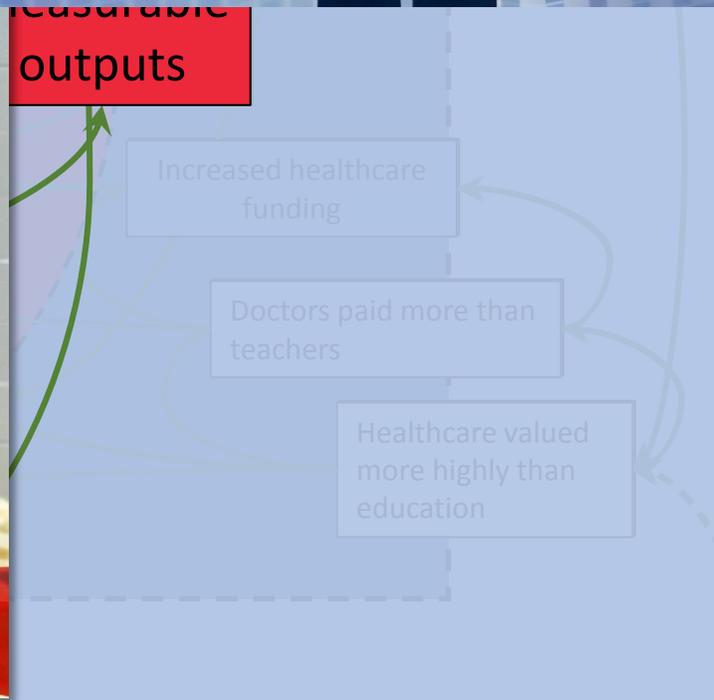
Increased accountability

Doctors paid more than teachers

Healthcare valued more highly than education

“Consumer culture”

Teachers do not feel recognised or valued



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can't..."

Faculty development

on

Loss of agency

Changing curricula

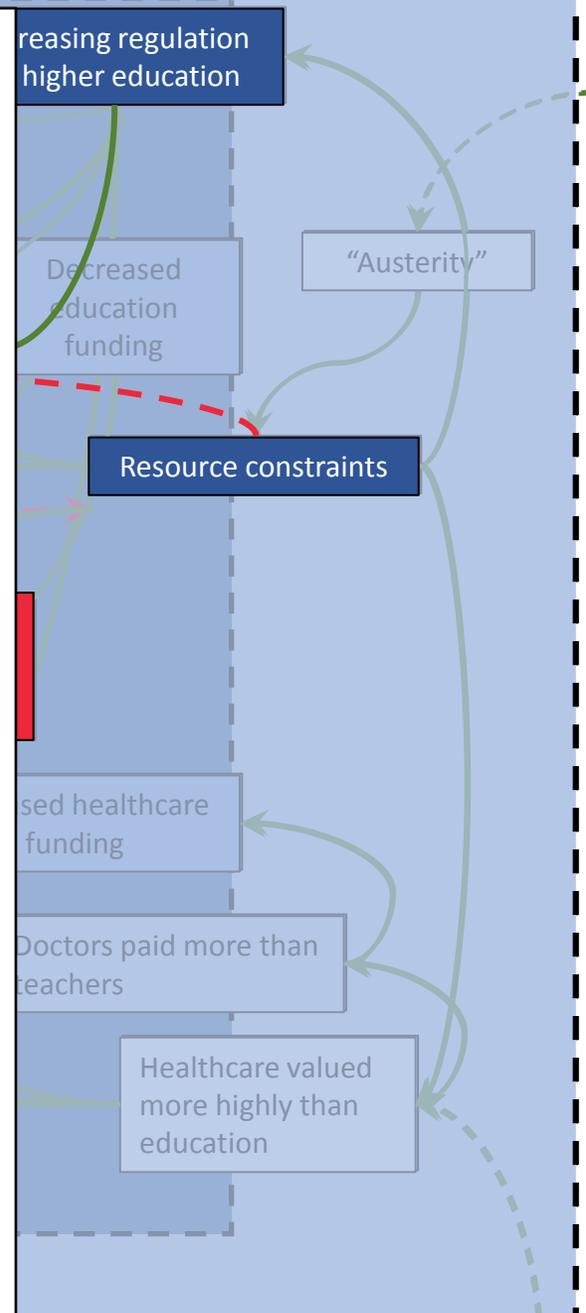
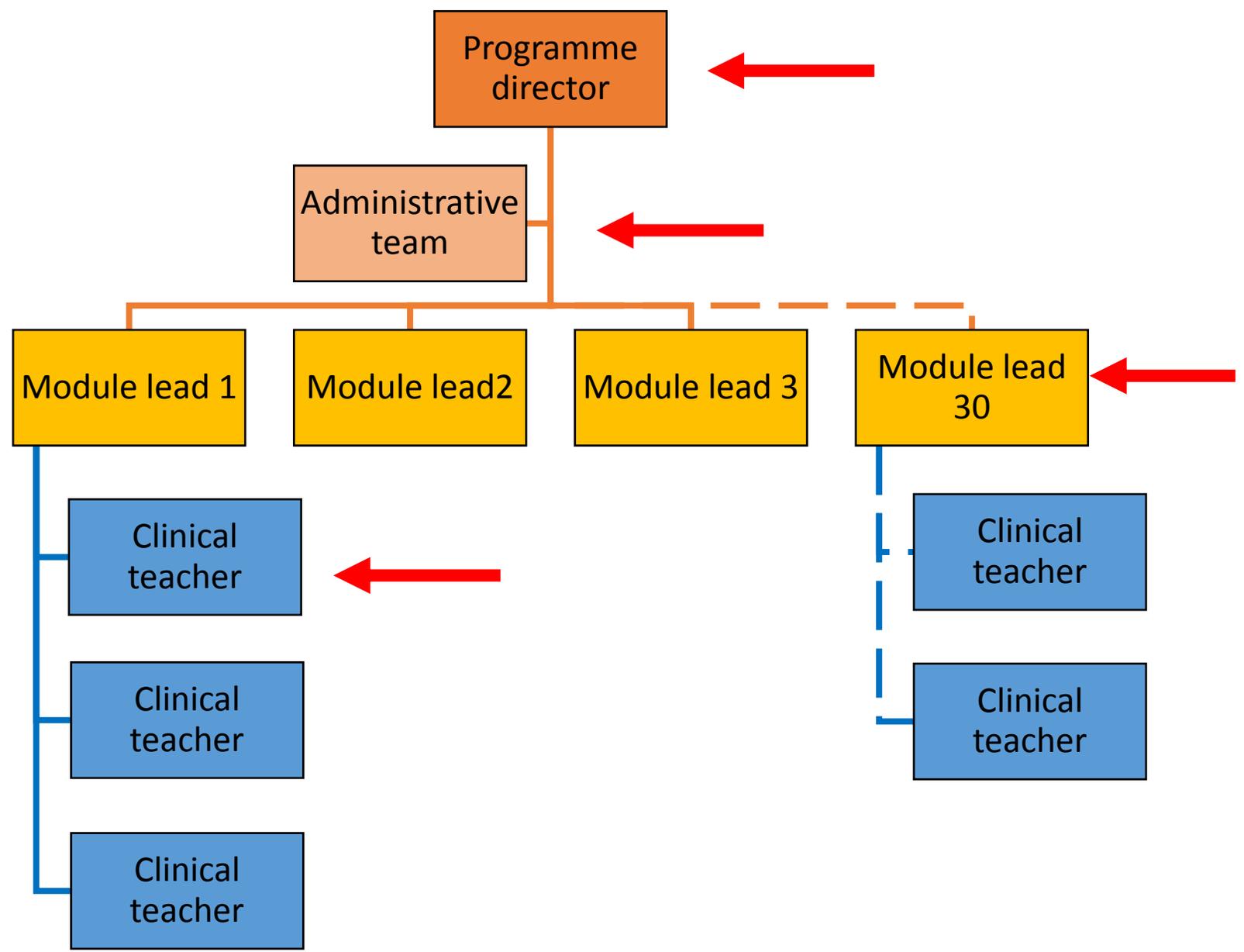
(organisation)

'Public Service'

Increased accountability

"Consumer culture"

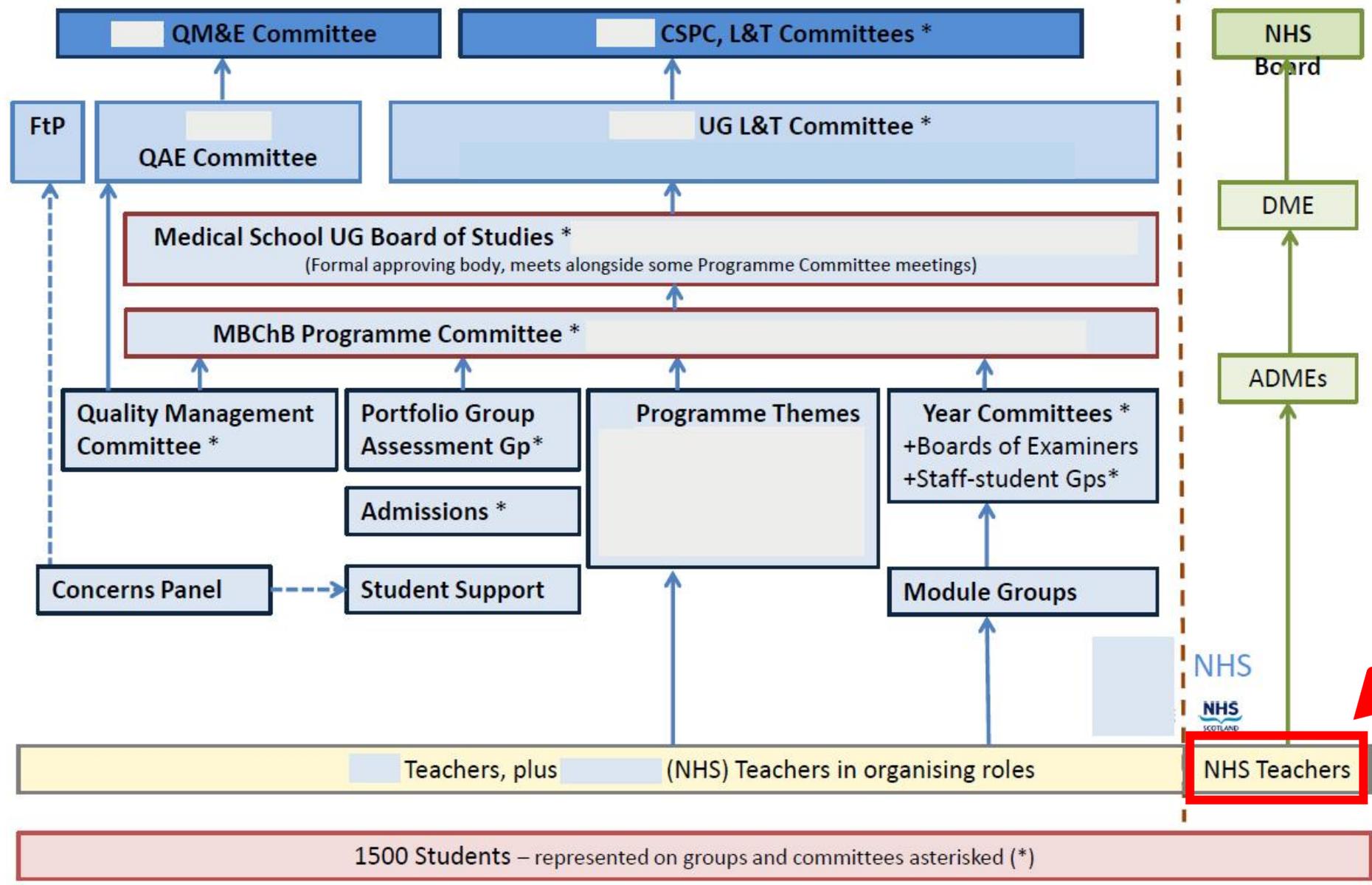
"New management ideology"



“New management ideology”

“Those who can do;”

Increasing regulation
Education

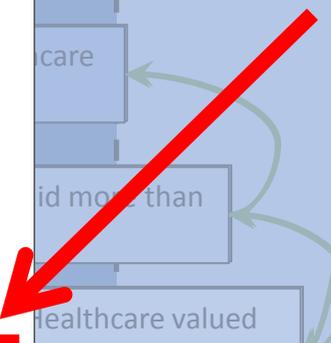


“Austerity”

source constraints



NHS Teachers



care

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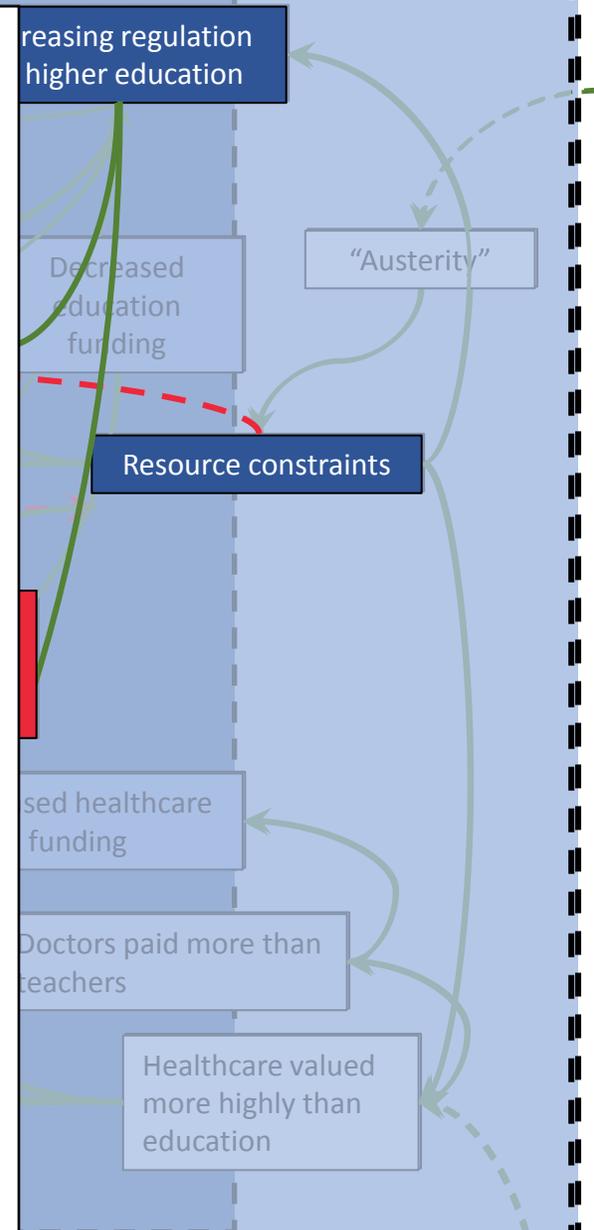
healthcare valued
more highly than
education

Popul
demog

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Top ten words by frequency:

1	learning	14385
2	students	12252
3	year	11410
4	education	10782
5	practice	10571
6	work	10345
7	take	10091
8	pass	8700
9	assessment	8368
10	paper	7990
...
16	teaching	7266



Removing agency from teachers

“Proposals for curriculum change may arise ... from the **modules/ attachments** within a Year”

(MBChB governance document, 2007)

“we will ask **all modules** to be specific about their expectations”

(MoT update, 2008)

“**Every module** will now be asked to draw up information to guide students’ learning”

(Committee report 2015)

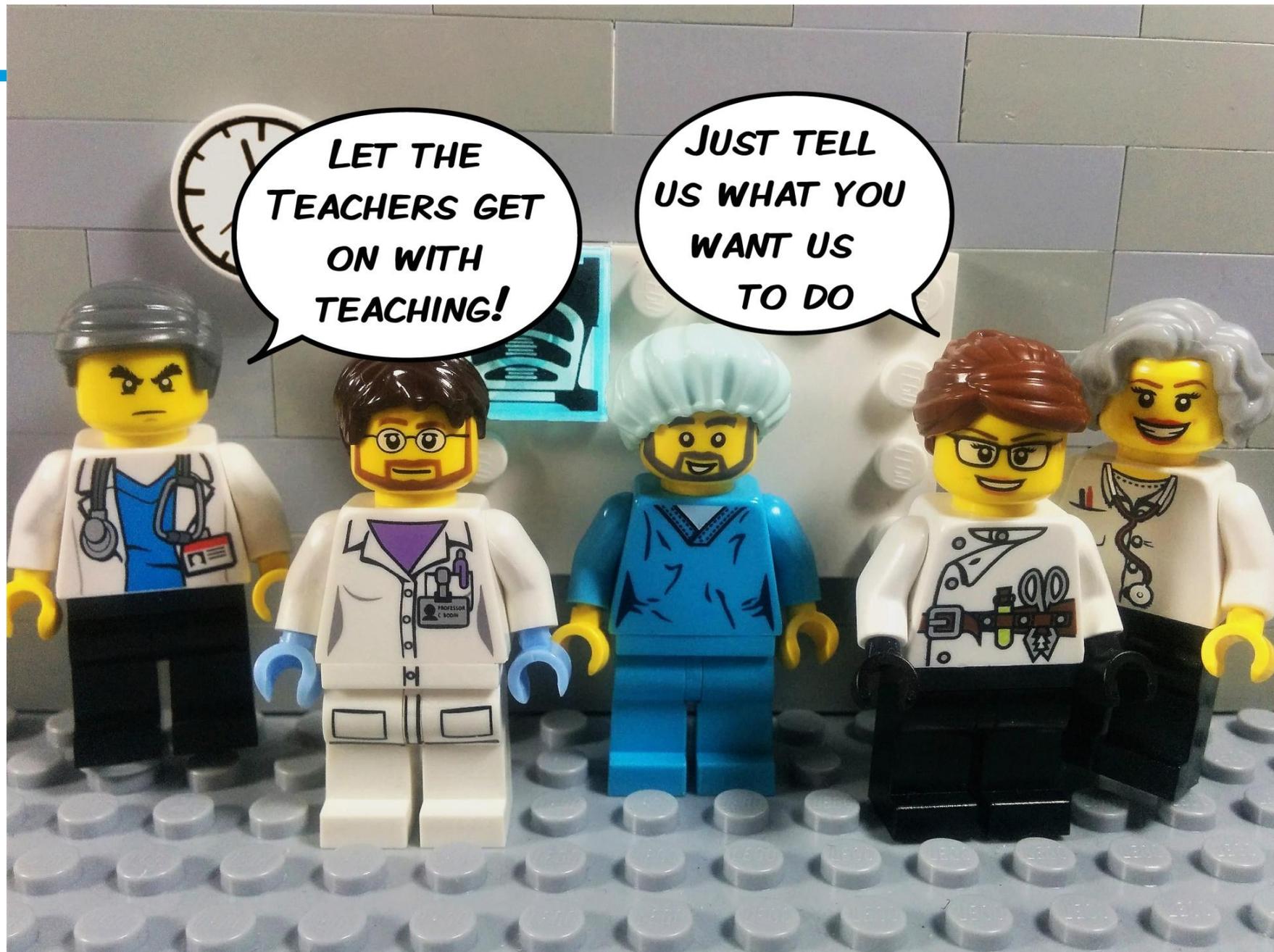
“training materials have yet to be received from the **Gastrointestinal module**”

(Programme committee minutes 2017)

Autonomy or direction?

"a named member of the staff of each module **must** be available by telephone during each sitting of the exam"

"**Sometimes** teaching staff [...] identify **apparent** gaps in the existing curriculum and **wish** to address these with some new teaching sessions, learning resources or even courses. **Sometimes** these are successful and usefully add to the curriculum."



In summary:

- The problem is complex and overdetermined
- Many of the causes are located at the societal level

BUT...

- Small nudges in the right places could make a big difference

5 'nudges' that medical schools could make...

1. Reduce emphasis on 'popularity contest' awards
2. Increase focus on achievement-based recognition, attainable by all
3. Improve visibility of teaching and teachers in organisational discourse
4. Use more direct language and talk **to** teachers (or even about them!)
5. Put the people back in the picture!