Reviewer's report

Title: Evaluation of a longitudinal consultation skills course at a new UK medical school

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Reviewer: Anne M Cushing

Reviewer's report:

This study describes the students’ perceptions of individual sessions in a longitudinal course of study in consultation skills over a 5 year programme. The students’ evaluations were positive about the sessions. The programme is important and educators will be interested in reading about a longitudinal programme. However the research relating to longitudinal programmes and the relevance of being a new school are not explained sufficiently.

Methodology:
1. What are the research questions – these are not clearly stated. It would be helpful to have the study aims more clearly stated at the outset. For example this is an evaluation of students' perceptions of their learning experience and not an evaluation of their actual learning or skills competency as measured objectively. The authors also need to clarify if this is an evaluation of the model (C-C) or the individual sessions or the course design at the outset. It takes the reader some time to get to this point.

2. The study design is of a cross section of all years of students during 1 year 2006-7 so a snapshot of one year not a longitudinal study of a cohort of students over the course of the 5 year programme. The evaluation is of individual sessions not of the longitudinal nature of the educational experience. This again should clarified in the aims of the study.

3. Questionnaire design is not discussed. Was this a validated questionnaire, derived from other published studies or developed to inform course development? It is unusual to have all the statements framed in a positive direction – this could skew results (analogous to leading questions in communication terms). It is not correct to say that a large number of responses should counterbalance this. There should be more discussion of this important factor.

4. Totalling the response rate gives no information about each year and it would be important to know variation across years. The data is added together giving a 67% response rate but is it higher in early years and lower later or consistently 67%? This would give information about student engagement. Sickness is not the only reason for non-attendance.

On page 6 the authors say ‘assuming attendance of 100%’ but don’t give
attendance figures. If they have the number of returned questionnaires in the year and the expected number for a 100% attendance at all sessions, they could provide attendance figures.

5. On page 5 the authors say this is an evaluation of effectiveness and efficiency. The latter is a measure of effectiveness (benefits) in relation to cost (money/resources) and is not discussed to any extent – other than a mention that the later years are ‘loaded’. The authors should either drop efficiency or expand their data on effectiveness in relation to resourcing if they have such data but it doesn’t appear that they have analysed data in this way.

6. The Course design (content) in the spiral curriculum should be in the background/methods section (possibly p5) not introduced for the first time in the results and discussion section.

Data analysis:

7. I cannot comment on the statistical analysis itself but it is not clear what the reasoning is for choosing this form of analysis other than to reduce the factors to 4. How does this form of analysis address the study questions or hypotheses?

8. The results mix both process evaluation (comments on how they learned and what helped) and the skills or attributes they felt they developed, in the same sentences. It would be clearer if these were separated.

Discussion:

9. P10 para 4. – giving and receiving feedback are not part of the Calgary-Cambridge consultation skills.

10. The authors state their study would need to be compared to concentrated programmes of study but could discuss here the specifics findings from other researchers – van Dalen’s work etc.

11. Time of administration of questionnaires could be discussed. Could it have been different if not done at the end of the session. Small groups with tutors present could influence evaluations with any course in a more positive direction. The evaluations are of each session – not of the experience of a longitudinal course as such. This is worth further discussion.

12. The authors refer to the gains in students' learning – the study is of the students’ perceptions of their learning – the latter is important obviously but it is not the same as evaluation of learning. This should be made clearer in the way discussion is written, otherwise will be misquoted.

13. There are no negative findings or difficulties discussed and whilst this may well be the case it is unusual. Perhaps a fuller discussion here of issues concerning longitudinal research within a course would be valuable. Or discussion of how Year 5 students could have evaluated their 5 year course.

14. Referencing:
P1. Sentence 3 – where is this assumed? - there is no referencing here – is there one.
Ref 5 – this sentence, as it is written, appears to be referring to teaching in undergraduate medical training as the cause of improvements in patient outcomes. The Harrington et al article quoted is a systematic review of interventions aimed at patients to increase their participation in consultations not about UG medical training.
p.2 missing references (0)- and elsewhere

15. Writing:
There are a few spelling and grammar errors
e.g. para 1 course’s
grammatical errors - p5
But others so check through.
It should be Calgary-Cambridge not Calgary/Cambridge.

Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Needs some language corrections before being published

Statistical review: Yes, but I do not feel adequately qualified to assess the statistics.

Declaration of competing interests:
I declare that I have no competing interests.