Author’s response to reviews

Title: The relationship between medical student learning opportunities and preparedness for practice: A questionnaire study

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Version: 2
Date: 21 September 2014

Author’s response to reviews: see over
Response to reviewers’ comments

The authors thank all the reviewers for their generous and positive comments. Where suggestions for revision have been made, the response is detailed below.

Reviewer 1

Thank you for a well-written paper on a subject close to my heart and of significant interest to both the medical education community and the general public.

No major compulsory revisions. Minor essential revisions:

1. I think it is worth adding into the discussion a paragraph or two about the relationship between confidence, competence and preparedness. Clearly the three concepts are related (in my mind anyway), but there must be an optimum level of confidence (with over-confidence perhaps presenting even more danger to patients than under-confidence). Does preparedness follow the same pattern - i.e. is there an optimum level or is more always better?

   This is a very interesting point, and we have added a paragraph to the Discussion addressing the topic. However we feel that the epistemological question is beyond the scope of this paper, and so have limited our discussion to raising the issue.

2. A small point is that my understanding of Tomorrow’s Doctors is that they constitute statutory requirements of medical schools rather than ‘guidelines’ (start of results section).

   This was imprecise language on our part and has been corrected.

Discretionary revisions:

1. I am interested in the fact that you excluded overseas trained doctors from your analysis. I understand your rationale (that their training schemes would not have fallen under the auspices of the GMC), but presumably the UK general public would hope that they too are adequately prepared to deal with acutely unwell patients. Perhaps worth a little more justification.

   The point is well made, but we felt that given the low number of overseas graduates, any representation of that data may be misleading. The overseas graduates were also a heterogeneous group from several countries. We have added justification of the exclusion to the method.
2. I don't think that assisting an F1 with the care of an acutely unwell patient three or more times constitutes 'substantial exposure' (results section), but perhaps a medical student would feel differently!

We agree the use of 'substantial' may be misleading, and have reworded the sentence to say 'several exposures'.

Reviewer 2

I really enjoyed this paper, especially the discussion. The authors have written lucidly and helpfully about the difficulties inherent in studying preparedness, and they have drawn some helpful conclusions about appropriate next steps. I agree that the challenge for educationalists is to help students maximise the benefits from the available learning opportunities. I feel that their opinions are interesting and valid.

My only issue with this paper is that the questionnaire was distributed before the doctors actually started work. This means that the data refers entirely to anticipated preparedness: the doctors have not actually had the opportunity to experience the workplace and therefore the authors’ results are not directly comparable to the previous studies which were performed during the first year of work. I think this is important, and needs to be clarified within the manuscript. I do not think it invalidates the results, but I think direct comparison (which the authors have refrained from) is not appropriate. I am concerned that the anxiety to which they refer may have affected the results.

We recognize this tension, and have addressed the epistemological problems around preparedness in a recent paper in Medical Education. Reference to this is now expanded in the discussion section.

Reviewer 3

This is a good well written easy to follow paper which I could recommend for publication with only a few minor alterations.

The title reflects the content of the paper. The introduction clearly sets the scene for the paper. I am not sure why the Foundation School is anonymous, though. The methods and analysis used are sound and relevant. The results are clear and easy to follow.

The discussion is good as well. Whilst focusing rightly on student assistantships the discussion could be expanded to include previous research about shadowing and a long shadow attachment which has been shown to give the experience to prepare students for these skills as first year graduates.

Reference to shadowing literature has been added.
I think the points made about simulation are very important.

I think the only weak area of the paper is the conclusion. I always think future work sits better before the conclusion along with limitations. I think the conclusion is weaker by finishing on a question; personally, I like to see conclusions finish with a take home message from the paper. The final sentence would sit better in the discussion.

We have followed this advice and rephrased the end of the conclusion.

Also, another limitation is that the graduates are self reporting before they have had a chance to have gained experience as F1s.

This point has been addressed as described in the response to Reviewer 2’s comments.

Although, this is an area which there has been a lot of publications on this subject using very similar methods in the last few years this paper does add to the body of literature in an important area and looks at it from a different angle as well giving a new perspective. It would be beneficial for the medical education community to see it published.