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ORGANISATION, FUNDING AND REVIEW OF UNDERGRADUATE PALLIATIVE CARE (PC) TEACHING IN UK MEDICAL SCHOOLS: A SURVEY OF EDUCATIONAL LEADS

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Background Some recently-qualified doctors report that undergraduate teaching has not sufficiently prepared them to manage PC patients. Individuals at UK medical schools trying to improve PC training may encounter obstacles¹. Little is known about the current organisation, funding and review of courses nationally.

Aims To investigate the organisation, funding and review of PC teaching across medical schools in the UK from the perspective of educational leads.

Methods A web-based questionnaire was developed and sent to PC educational leads at all UK medical schools. This study received ethical approval.

Results All 30 medical schools responded. In 20/30 (67%) there is a formal PC component to the medical course. PC teaching most commonly occurs in years 4 and 5. Most (28/30, 93%) offer a Student Selected Course in PC, this is taken up by <25%. Insufficient places may be a factor in 11/27 (41%).

In 20/30 (67%) development of the PC course was planned, in 33% development was ad hoc. In 26/30 (87%) a PC lead(s) co-ordinates the course whilst 4 (13%) report no clear lead. Sixteen of 28 (57%) respondents had a teaching qualification/specific experience. An academic department of Palliative Medicine exists in 12/30 (40%). The mean hours per week spent on PC education was 3.3 hours (22 respondents). Funding/ financial recognition is not provided for PC course leads in 12/22 (55%), their organisation in 10/21 (48%) or PC teaching providers in 6/24 (25%). The PC course is regularly reviewed internally in 25/29 (86%). All universities seek medical student feedback.

Conclusion Variations exist in the organisation and development of PC training across UK medical schools. Lack of leadership and resource allocation may hinder ability to provide PC teaching to medical students.

REFERENCE

- Gibbins J, et al. Incorporating palliative care into undergraduate curricula: lessons for curriculum development. *Med Educ* 2009; 43(8):776–83.