GP AND MEDICAL STUDENT PARTNERSHIPS: THE VALUE-ADDING OF LONGITUDINAL EARLY CLINICAL MEDICAL STUDENT PLACEMENTS IN URBAN GENERAL PRACTICE

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Background
There is excellent research evidence demonstrating the success of innovative longitudinal integrated clinical curricula including benefits to GP teachers, but most examples have been in rural locations, with only a small number in urban settings. Early clinical placements have been shown to provide a range of benefits for students but there is little literature about longitudinal, community-based, early clinical experiences.

Aims/objectives
The University Of Queensland School of Medicine’s Urban Longitudinal Integrated Community Care (Urban LINCC) Project aimed to increase clinical training capacity and provide a longitudinal, community-based, early clinical placement for medical students. The focus was on developing clinical skills and gaining experience in continuity of patient care and the complexities of managing patients with multiple problems.

Methods/approach
In 2013, 32 year two medical students spent half a day/week for either 13 or 26 weeks on a clinical placement at one of 25 urban general practices. Survey evaluations from GP teachers and students were collected, and a semi-structured interview guide was used to question a sample of approximately half the participating GPs (14) and students (16) about their experiences.

Results/findings
The program was very well received by students and GPs, with a range of learning experiences reported. Highlights of the placements, suggestions for enhanced learning opportunities and benefits of the GP-student partnership were provided.

Discussion
The Urban LINCC project established new community-based, longitudinal, early clinical placements for medical students and provided the GPs and students with rich learning experiences. The experience has also provided some insights into the important factors in facilitating these GP-student partnerships.