

Teaching crisis for trainee doctors

- *By Mark Metherell
- *Sydney Morning Herald
- *August 6, 2012

Trainee doctors face a struggle to get enough "hands-on" time with patients as the boom in student numbers outpaces the availability of medical educators in many public hospitals.

Ward rounds, where students learn the craft of diagnosis, are becoming increasingly crowded. Senior doctors have to teach the finer points of medicine to eight or more students clustered around a single patient.

Medical students typically learn much of the craft of diagnosis from watching a specialist in action with patients at teaching hospitals.

The training crush has been aggravated by a scarcity of specialist educators in hospitals. What is worse, the Australian Medical Association says, is that the national health funding reforms will deepen the problem because the focus on service costs has failed so far to take account of the cost of training to public hospitals.

In the past decade, medical student numbers have more than doubled to about 17,000 in Australia, but medical schools have complained that hospital training resources have failed to keep up - a problem at risk of worsening under the funding reforms, the AMA and medical school deans have warned.

Geoff Dobb, the AMA's vice-president, said it was now common for hospital consultants and registrars to have eight or more students accompany them on a ward round when previously there would have been two or three at such sessions.

"There are lots of signs of pressure on training quality," said Professor Dobb, an intensive care specialist. "I don't think it is yet affecting the quality of medical graduates but I don't think we are far from the point at which it will potentially do so."

Learning to identify patients' conditions was obviously best learnt on living patients, he said.

The AMA has sent a submission to the Independent Hospital Pricing Authority calling on it to give greater priority to formulating a policy on the pricing of hospital medical training on which the federal government will base its funding to hospitals.

Delays in funding arrangements created "a significant risk" that training and research would not be sufficiently recognised, the AMA told the authority.

The president of Medical Deans Australia and New Zealand, Justin Beilby, said medical schools were experiencing problems with the supply of medical educators, partly because younger consultants were less likely to take on the training role.

It was important for the pricing authority to deal with the issue this year to ensure the health funding reforms did not further complicate the training problems, Professor Beilby said.

James Churchill, the president of the Australian Medical Students Association, said students were concerned at the strains affecting training sessions.

Apart from the diminution in training quality, "being faced with increasing numbers of students may be a challenge for patients", he said. "We need to ensure the increasing numbers of students don't impact [on patient care]."