

Medical student teaching in a private hospital: A positive experience for patients, students, and staff

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Introduction

Medical students numbers have increased significantly and suggested that changes in the established manner of teaching would be required to meet this demand.

The majority of elective surgery in Australia is now performed in private hospitals, as is much obstetric care.

Prior to the expansion in medical student numbers, local research indicated that as many as 49-60% of patients in public hospitals may be practically unavailable to participate in student teaching.

In Australia, there are several co-located public teaching and private hospitals which offer an opportunity to expand teaching capacity. North Shore is one such site that allows for a co-located educational program.



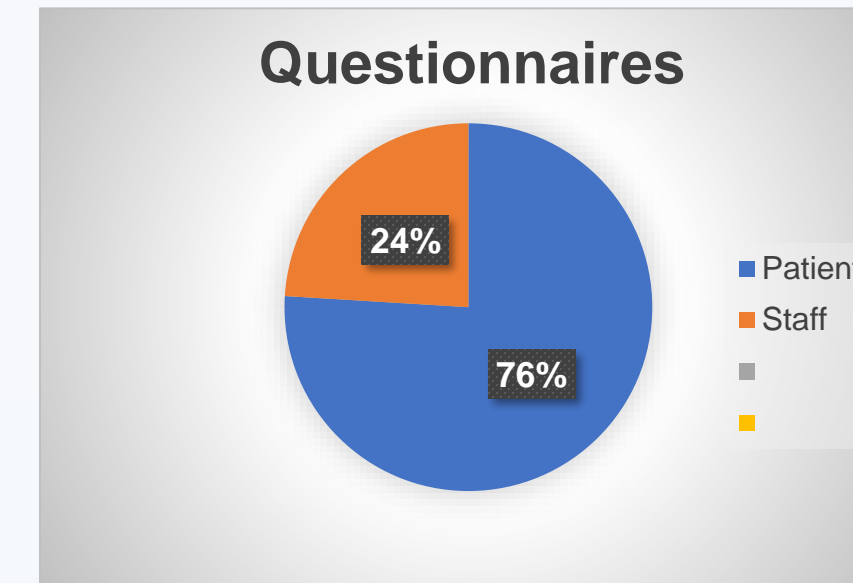
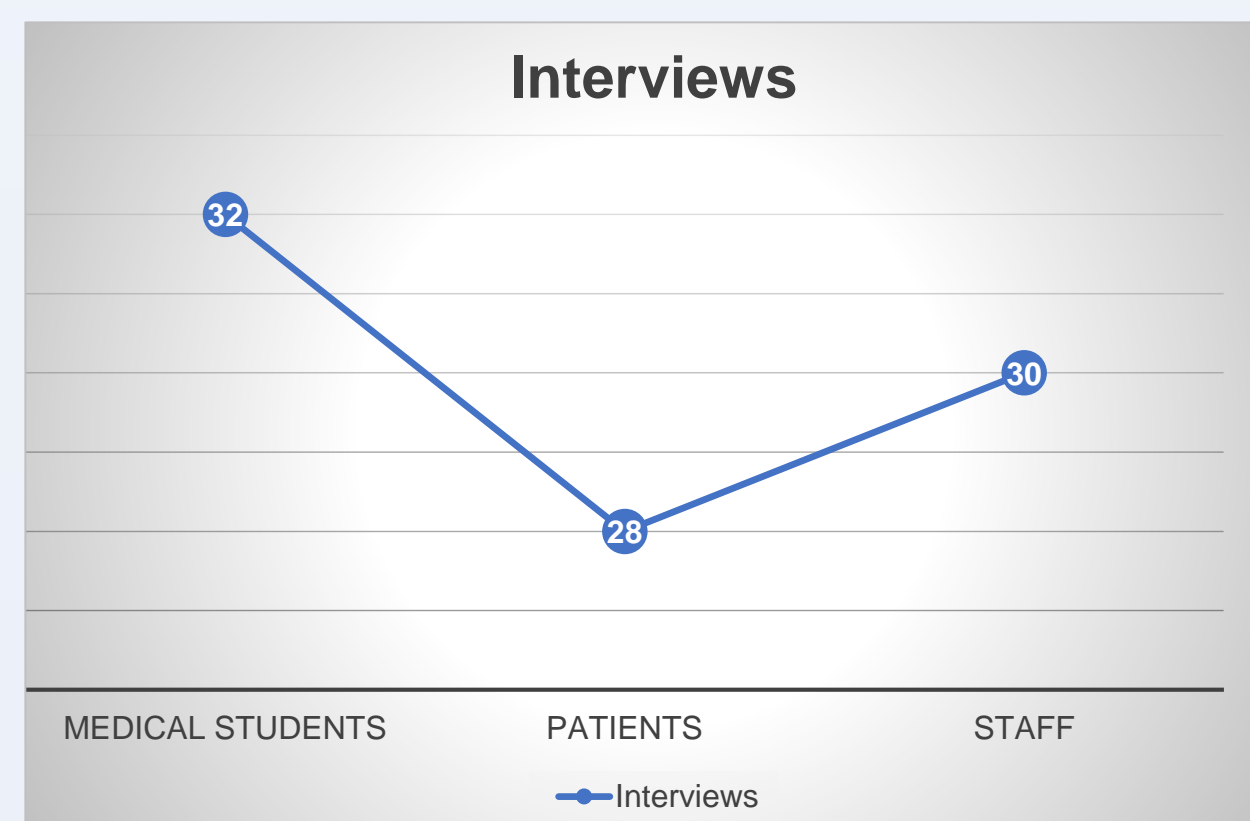
The establishment of NSPH as a teaching hospital of the University of Sydney (UoS) allowed us the opportunity to study a collaborative approach to the clinical education of medical students in a private hospital collocated with a UoS teaching hospital, and well established clinical school.

Method

North Shore Private Hospital (NSPH) is a 241 bed hospital co-located with a 628 bed teaching hospital Royal North Shore Hospital (RNSH). Graduate students at the Sydney Medical Program (SMP) from stages 1-3 (years 1-4) received part of their clinical training at NSPH. In 2010 funding was received from the Department of Health and Ageing to increase clinical training capacity and NSPH was utilised to provide additional clinical placements.

An ethnographic approach was used to capture the views of inpatients, stage 3 students spending a one month clinical attachment and staff at NSPH. Ethical approval was obtained from the UoS Human Research Ethics Committee and Northern Sydney Central Coast Human Research Ethics Committee.

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Results

There was a high degree of acceptability amongst all groups of participants. 94% of patients were willing to be interviewed and examined by medical students. Some major themes identified were the favourable environment, enhanced access to clinical settings and experiences, overall advantages for all participants and potential challenges.

Four main themes were identified via descriptive analysis:

1. Enhanced access to clinical settings and experiences

- a. Interaction with VMOs
- b. Less competition for patient access
- c. Inter-professional learning

2. Favourable environment

- a. Layout of rooms and wards
- b. Hospital less busy
- c. Co-location with Public Hospital and University

3. Overall advantages

- a. Patients' sense of contributing to medical training
- b. Staff development
- c. Reduced pressure on the Public Hospital system
- d. Better understanding of different health systems

4. Challenges encountered

- a. Lack of medical team structure
- b. Lower patient acuity
- c. Potential decrease in efficiency

Conclusion

Medical student teaching in a large private hospital can offer accessible and suitable clinical training opportunities. The concept of private hospital inpatients participating in student education is acceptable to patients, students, teachers and allied health staff. Perceived barriers to the participation of private patients in student teaching did not materialize from the perspective of any of these groups.

Acknowledgement

North Shore Private Hospital (staff and patients)
Sydney University (Staff and students)
Department of Health and Ageing
Associate Professor Margaret Schnitzler
Professor Mark Arnold

