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Education research for the benefit of patients, students and residents

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Workplace learning is more or less absent from a recent list of topics that dominate medical education research [1]. We have become so accustomed to teaching, training, and assessment dominating our field that the absence of workplace learning could easily pass unnoticed. But being taught, trained, and assessed merely prepares people to learn to practice. People learn to practise by practising. The current situation has been likened to giving hungry people menus rather than food [2]. It would not matter so much if our obsession with preparation was harmless but relentlessly preparing and assessing professionalism can actually deprofessionalise learners. My argument is that workplace learning should be moved from hidden curricula, where it currently languishes, to the centre stage of medical student and residency education, and continuing professional development. I will present my model of learning to practise [3], which locates medical education within a triad of mutual benefit, comprising skilled practitioner, patient, and student practitioner. I will report work in progress, in which we are augmenting residency education with a type of education that is deeply embedded in practice. Finally, I will suggest methodological approaches that make this type of research possible.



References

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