Final Research Report

Aim and objectives

The objective of this study was to enhance the training paradigm for general practitioners by conceptualising and implementing a model that facilitates the role of GP registrars as clinical educators. We aimed to devise a model that fosters the development of teaching competencies among registrars while concurrently exerting a positive influence on the learning environment within the primary care context. The research questions underpinning this study were centered on elucidating the effects of this model on registrars' teaching proficiencies and experiences, its impact on medical students' inclination towards the field of general practice, and its ramifications on the workflow dynamics of GP supervisors.

Method

The research was carried out in two distinct phases. Phase 1 involved a small group of participants who collaborated in co-designing a pilot intervention. This intervention included teacher training sessions and teaching opportunities for the participants. Following Phase 1, Phase 2 implemented the intervention on a broader scale, incorporating feedback from the initial phase. Data was collected through focus groups and surveys and subsequently analysed using reflexive thematic analysis for qualitative data and descriptive statistics for quantitative data.

Results

This study achieved the practical implementation of GP registrars as near-peer teachers, through a supported and semi-structured framework within the primary care setting. As an outcome of the project, the GP registrars experienced an increase in their confidence and competence, as well as the development of a dual professional identity as both clinicians and educators. Although there were certain trade-offs involved, such as time constraints and financial considerations, the registrars generally valued the teaching experience and the professional development opportunities afforded to them. Medical students and other learners also appreciated the diverse teaching styles brought by an expanded educational faculty. GP supervisors reported either a neutral impact or positive effects on their workflow and stress levels.

Discussion

Offering formalised teacher training sessions and allocation of teaching activities can cultivate confidence, competence, and an educator identity among GP registrars. Through this approach, registrars can formally assume a more significant role in teaching medical students or engaging in other near-peer teaching opportunities during their training period.

Implications

The insights and framework of this co-designed project can be used for broader implementation and scaling. A structured teaching program, coupled with clearer funding policies and institutional support mechanisms, can facilitate and encourage the involvement of GP registrars as educators in primary care clinical settings. This project offers a transferable blueprint that could be integrated into existing GP training programs or community based allied health training across various contexts. Such integration would yield benefits, including enhanced professional development for trainees, a diverse educational faculty for the profession, and improved engagement of university students.

Future research

Further research could explore the long-term impact of such structured teaching programs on GP registrars' professional development, teaching skills, and their ability to effectively mentor and inspire future generations of medical students and trainees. It could also investigate the potential benefits for medical students and their learning outcomes when taught by GP registrars who have received formal teaching training. Additionally, the creation of a similar study using one or more of the allied health professionals to test the transferability of the model to other community-based training of health professionals would be valuable.