



## ***Present and Remote: Providing Virtual Support to Medical Students.***

### **Transcript of webinar:**

KEVIN

OK welcome everybody to our latest ASME BITESIZE session. My name's Kevin Brandon I'm the ASME TEL SIG Chair. The session today will last approximately 45 minutes. If you wish to ask a question please do use the chat field. The feature is available by clicking the chat button at the bottom of your screen and can I ask that you please select the option to post onto the chat to panellists and attendees so that everybody involved in the webinar can see your comments or questions. If we don't get time to answer all the questions, we will provide a document after the webinar with any questions we were unable to address. So the chat field is available for you to contribute to the conversation and we may invite participants to expand on their comments by asking their permission to make their audio and video live, if we do that please respond via the chat field that you're happy for us to add you as a temporary panellists to join the discussion and expand on your comments. We're very much in the lap of the Gods with the technology with this but we'll all roll with it and see how we get on. The webinar is going to be recorded and a video of the webinar will be made available on the ASME website along with any other support material. If you're having technical problems then we ask that you make ASME aware by emailing [events@asme.org.uk](mailto:events@asme.org.uk) rather than adding into the comments field. OK so that's the sort of housekeeping notes done and dusted. So, it's my pleasure this afternoon to welcome Ed Horowicz and Jayne Garner from Edge Hill. Ed and Jayne are senior lecturers from Edge Hill who have been involved in the development of the medical curriculum there over the past two or three years and I think they're still living it out. Ed's a registered nurse and senior lecturer in health, wellbeing and conduct, and leads that aspect of the curriculum. Jayne is the student support lead and they're here to talk to us about providing support remotely and digitally. So, I'll hand now over to them thank you Ed and Jayne.

ED

Hi everyone and thank you Kevin. So, a few thank yous first of all for having us, so firstly to Leigh who's worked so hard in supporting us and allowing us to come and present today. And of course, thank you to Kevin for that very kind introduction but also for co-ordinating this session. Jayne and I are here to kind of deliver this session around providing virtual support to medical students and certainly we're going to look at medical students in a broader context because of our institution but hopefully it resonates with you as well. Importantly I guess this is all triggered by the global pandemic and the way in which we have changed our teaching, the way in which student learning has changed, for us particularly it's about thinking how do student support respond to that and what's the impact of that on student wellbeing. So, our aim today is really just to highlight you know the challenges facing medical education in supporting these students virtually and remotely, and why this has presented new challenges to us as educators. So, we start with a disclaimer and we do this with very

good spirits in turn this session was not written or designed to give a 'how to' support students virtually and remotely whilst sessions are not delivered in the normal format. If anything what we wanted to do was start good conversations, start us thinking as a group, as those of us involved in undergraduate and postgraduate medical education how do we start to have these conversations with each other within our institutions, support each other in sharing best practice in sharing ideas, in sharing experiences because one of the things that we've come to realise is student support has become quite isolating. Isolating for students and their experience but also isolating for us in giving students support and providing those services just because of the way in which things have changed. So, our disclaimer is not that we are here to give you any kind of tips or 'how to', it's purely to start these conversations but to share experiences and share perhaps some of the things that we've been dealing with and some of the issues that have affected our students and how we've responded to perhaps start those conversations. So that's great. And I guess the reason that that's the approach we've taken is as you're all aware for everyone who's involved in student support that there isn't a one size fits all. There isn't a student, every student is different, every student comes with different needs, faces different challenges and certainly we've found that emphasised in remote learning, and the types of support that students need. Jayne's going to talk about some of the programmes that we have at Edge Hill and why that's caused us to really have to think about how we make sure at least demographics of students can have services tailored towards them. But I think this is always the important part that that one size fits all is so crucial to us in the way we think about student support.

JAYNE

Thank you Ed I'm just going to pick up there and talk a little bit about the courses that we have at Edge Hill University Medical School. We're a new medical school, so our foundation year for medicine and widening access 6th year programme started last September so those students have been with us for a year now. Our MBChB programme direct entry started in September this year as well so, our students from the foundation year transferred onto that with the new members of direct entry students as well. And as you'll see we're small numbers so we've got approximately 15 students in our foundation year for medicine programme and then 30 total, so another 15 students joined for the MBChB. So, we are I think the smallest medical school in the UK and I think that gives us, you know, different challenges as well. But also, you know it also gives us the opportunity to really get to know our students as well. Their needs, their personalities as well so you know I think there's certainly a lot we can draw on that which we're looking at today. We also have physician associate students so our second cohort started in September this year, and physician associates obviously they're level 7, they're Master's degree level students so they previously have a degree and they're quite a diverse group certainly in our experience. Some of them are straight out of biomedical science or degrees, straight out of their first degree from university, whereas others are already established practitioners within another role. So, we have nurses, phlebotomists, we've also got operating department practitioners within that cohort. And so also a lot of them have families, are at a different age and stage of their lives as well. So, to tailor our support and services has been quite a challenge we have these students who are straight out of school, 18-year olds living on campus right through to the physician associates who have other jobs perhaps, family commitments. So, I think tailoring this and recognising these individual needs has certainly been a challenge for us that we're going to discuss in more detail today. And just a little bit of background about the support systems at Edge Hill. So, as I say we're

a very small medical school and that has advantages for us in that we know individual named contacts within the teams that we work with centrally. So, certainly our wellbeing service, counselling team, our inclusion team as well, Ed and I have really close working relationships with. We know who we can ask you know in terms of support or anything we're not sure about and that cuts across as well to other services like our learning services unit, the student union, we have a dedicated careers advisor for the medical school as well. So, we have quite a comprehensive package and communication around what we have available at Edge Hill and our students are very much at the centre of that if they're on foundation year MBChB or physician associate programme. I'm going to talk a little bit more about our personal academic tutor system as we go forward as well but that's just to give you a flavour of where we're sitting in terms of the institution and the support we have available generally as well. So, I just wanted to say a little bit about background really. And I'm sure that the two tables that I've got here certainly the one on the left about students seeking mental health support. It's BBC data, and it shows that progression certainly over the last couple of years and that trend has continued. We've got more students in higher education in universities accessing treatment for mental health issues. And in some ways, this is really positive and I think that students are recognising when they need support, when they need to access these kinds of services but conversely that does place a demand on the services as well and sometimes means waiting lists or you know referrals might not be as quick as they have been in the past. So, again that raises different challenges for us in terms of signposting and what we have available certainly on campus for our students. And the second diagram on the right; medical students this is an American study looking at rates of burnout, issues around resilience and measuring the scores of medical students against a general population sample. And as you can see from the chart there, very basically that medical students are more likely to be presenting with issues around mental health and struggling, and burnout than other sort of groups in society more generally. And I think certainly working within these fields for a number of years we all recognise that medical students do put an awful lot of pressure on themselves. They are high achieving students and they have a lot of issues academically to deal with and a lot of pressures, but also you know in their personal lives as well and certainly the changes in finance, in economics, student loan systems and other things. There're maybe more pressures that students have in addition to just the academic challenges that they face, certainly studying medicine as well. So, it's just to give you a little bit of background about these kinds of issues generally. Obviously in the last couple of months you know there's been huge impact on these issues due to Coronavirus and mental health. And so generally, you know, reporting numbers of people choosing or wishing to access mental health services are up generally. And nationally there's a lot of implications around this in terms of reported issues around isolation, about loneliness, about people's mental health, wellbeing, sleep patterns, you know being in lockdown has massive implications for people in terms of their living arrangements, their family relationships. You know maybe things that they would do to maybe let off steam, or you know deal with various pressures and wellbeing, have all changed in the current situation. And so, this presents challenges for everybody but certainly for us as medical educators I think that is something that we wanted to look at today. Just in addition to that as well. I just wanted to add yesterday in the Guardian in the UK, a national newspaper, there was a piece about student mental health generally and about isolation and loneliness. And this is very much a current issue based on the situation and something that is

accelerating and I think is important that we recognise and start to discuss about how we can deal with it effectively. So, I'm going to pass back over to Ed.

ED

Yeah great. I mean I think what we wanted to convey is that there is a broad range of issues and I think that's very well reflected in the demographics of the students that we have and certainly one of the key issues for all students and a commonality that all of you will be experiencing is that isolation. Whether it's isolation within halls of residence or whether it's isolation kind of at home, isolation in managing other commitments. So, childcare for example is something that we have to support students with or support managing their learning with. Certainly, the frustrations that they're feeling in relation to whether or not they are at the level that they should be because of learning remotely. That idea of putting a lot of pressure on themselves. But equally staying focussed, you know, I'm going to talk through some of the issues in a minute but you know certainly some of these visuals I think are, you know, whilst we might have students who are very diligent and very organised it's important that people are distracted, it's much more distracting being at home, much more distracting being around different environments and you're subject to a lot more, students are subjected to a lot more variables. And certainly, on top of that we have the pandemic itself and the impact of that upon the family, upon the students themselves you know in terms of their health, wellbeing and kind of managing other resources. So, I think it's about kind of saying that again its vast the types of issues that we're seeing, that we're all probably seeing and it's going to be interesting to talk to you once we've done our presentation around the discussion you know you're experiences and those challenges. But I think one of the important parts of medical education, but all of higher education, is sort of an inclusivity in relation to student support and recognising that that demographic of the post-compulsory education leaver, 18, 19-year old upwards, early 20s isn't always reflective of the demographics that we have. And certainly, the drive for widening participation and at Edge Hill we're very much focussed on widening participation, in fact 50% of the cohort are from WP backgrounds, the types of resources and the facilities and the way in which they learn remotely are very different and can be very different and challenging in comparison to students who perhaps come from more traditional backgrounds. So, we wanted to talk about two types of issues really. Student issues which are becoming well documented in the literature and certainly this year we've seen a rise of publications and studies in relation to student issues, medical students and managing their studies in the Covid pandemic. But I'm also going to look in the next slide, issues around tutor issues and I think that's a really important and slightly forgotten about focus within the literature currently. And we've put some resources and further reading, and some papers at the end. But in terms of going through student issues it's a broad range and it's presented us with issues that we haven't seen before. So, obviously technology is increasingly important; Wi-Fi, strength of Wi-Fi. One of the problems that we face in terms of supporting students as learners, also in terms of meeting with them is rated connectivity and the increasing technological advances in our systems, the fact that we can do audio visual meetings just like this, Zoom or Teams or whatever platform you use, actually the drain on that on connections and often students having to perhaps prioritise audio over visual, and really struggling with attendance and even as we'll see in some cases studies in a bit we see attendance being really difficult. We know that students have caring commitments. Many of our students from WP backgrounds have caring responsibilities or duties. We've seen a huge issue in relation when we had the first lockdown for our MSc PA students in relation to home schooling and managing that, and managing educating

their children and keeping on top of their studies so the way in which the programme was delivered had to radically change. But also, the support they needed had to be tailored to much more convenient times. Sharing computers so we certainly see not just in terms of the connectivity but we certainly see in students who perhaps are from larger families whereby not everybody might have a laptop and IT. Sharing those resources, those hard resources. Privacy has been a huge part of some of the issues that we've experienced with students. Privacy in terms of when and how they're able to access support and conversations with us. Certainly, dealing with some of the more sensitive issues in relation to the course and trying to navigate them through that. You know I teach medical ethics and you know certainly some of the most challenging issues and one of the things we find or have fed back is students have said that whilst they can engage with the session it's perhaps more difficult to do at home particularly if there are other family members around. Study space becomes an issue so lots of students, just like us, I'm currently camped out on my dining room table and have been for the last nine months, I don't have an office so study space, you know space where I can actually focus and students feel the same, they experience the same. Stress of managing additional roles. This is an important issue because we're seeing not so much in our MBChB, perhaps some foundation year students but particularly in physician associate students, many are registered healthcare professionals already, or work in other allied services whether it's biomedical science, labs and you know that can still apply to some of our undergraduates as well, and they've experienced a lot of pressure in which to attend their place of employment to provide patient care or services that contribute to that. And whilst we want them to focus on their studies there have been, a lot of them have expressed to us that they've really struggled with that kind of emotional pressure and that moral obligation that they feel they should be helping out in this pandemic. So, we've got students undertaking full-time study and almost full-time work as well and that's definitely affected them. Money of course has been a huge issue. So, from the perspective of individuals being unable to work in their other jobs, whether that's in hospitality, part-time jobs or whether it's those that have had their household incomes restricted and reduced I think that's been an important factor and the stress upon them. And not perhaps, it may not influence their studies directly but obviously it influences the tensions and the difficulties at home indeed many of our students do live either in their own private accommodation or marital family homes. Structuring time, engagement and motivation. I think motivation is probably the area in which we can highlight in our case studies but motivation has been an issue that countless students have approached both Jayne and myself about how they're feeling, that they just don't feel like a student. They haven't got that get up and go, they can't just sit at a laptop and feel inspired to carry on with their studies. They're not getting that support just by being physically present. That idea of being remote has really had a huge impact upon them as it has for staff, and I'll come to that in a minute, but I think motivation has been a huge key issue. And of course, with engagement, you know, one of our elements of professionalism assessment is engagement, are they engaging? Well, what we've found in the pandemic and students being remote is they're engaging in different ways. You know, that they can't just sit for eight hours for sort of the reasons I've just talked about because they might be engaging with pre-recorded material very late at night or very early in the morning, or perhaps they have set days of the weekend rather than these sessions that they'd be physically present for in a normal and physical timetable. Anxiety has been something that we know is increasing in the literature and particularly in higher education in students and certainly you know that anxiety in relation to how well they're doing. The idea of the pandemic themselves

and them being a citizen in society, you know, an individual experiencing everything just as we are and perhaps with slightly less life experience and that can cause a lot of anxiety. And of course the subjects that they're studying they perhaps have a better insight into the realities of what's going on in the world and that perhaps causes them some concern around you know questioning whether they would be resilient enough, if that's the right phrasing, or some students have described them as being strong enough to be able to be a doctor or a physician associate in a world that is so changing and has so much demand upon our medical workforce. Certainly, kind of that anxiety is a huge driver for accessing support but also, we find a big driver for perhaps those shying away from support and retreating further and further back and trying to bring those students back in and make sure that they are well signposted to support and that they're constantly reassured that asking for support is ok. And really that's a big message that we put out as I know that all of you do. Loneliness and isolation well I think I can certainly speak on, you know I've been working at home for nine months while my wife goes out to clinical practice and works everyday it's very different and I'm sure for many of us you've experienced it. So, certainly for students who have the expectations of an experience beyond just learning, you know, forming some friendships, other relationships, life events, all of these expectations are not able to be met. And particularly those who've just joined us this year, you know, this is a very, whilst they might have experienced some of the reality of this in their compulsory education space we've certainly seen an increase in how isolated they feel and that perhaps has contributed to much of the anxiety, not just around whether they're keeping up, but we see a lot of anxiety already about assessments. When we think about our entrance for this year, for foundation or for the first year MBChB just as you all have in your undergraduate medical education, we're looking at students who perhaps haven't sat an exam maybe under those conditions for a year and a half or so since March. So, really worrying about whether they can still do this not, having had that traditional journey and transition from compulsory education to higher education. And of course, then we go back to you know the relationships with new groups. Now obviously you come from schools that might have cohorts of three - four hundred, from a very small cohort but in any case, you know those relationships within a peer group are incredibly important and to try and do them online is very, very challenging because one of things that we found is that students don't want to be online. We can try and put on events but we know, and the literature tells us that actually students don't want that anyway. They want to find their own groups and develop their own relationships but when that's only through group WhatsApp at present that can be really challenging and a lot of students who aren't the most confident and are really worried about developing new relationships. So much so that it affects their attendance when we do have face-to-face sessions. So, if we move on to the tutor issues. Now this I think was something we really wanted to highlight and hopefully we'll get to generate some of the discussion for us today. It's perhaps not talked about in the literature you know we see it perhaps in popular press and media but we're not seeing it I don't think in the literature, not to my knowledge anyway, I think when we think about student support we're not seeing students face to face, so we're seeing them in an online platform just as we are now and perhaps that causes us concern because it's more challenging to read people, the subtle non-verbal cues that perhaps you know time that we have, that space in which we can have good frank discussions with them around their pastoral care is perhaps slightly more challenging online. Often, we're doing so just as I am now and just as we all are, doing this in our own home and I think one of things that we've certainly seen reported back from our team who support

students and other tutors and certainly personally this perhaps changes the dynamics of these very professional relationships. Whilst we're very passionate about supporting students and want to support them to develop and grow and achieve the goals that they're capable of we create and rightly so, clear boundaries as to the role of student support from academics and what that relationship looks like. When we start arranging these meetings and having them into our own homes we start and my children are interrupting me, the dogs on, it changes that dynamic very much. And I think one of the other ways it's changed is perhaps we worry that we're sharing too much just by perhaps not being in the appropriate university space but also that these things start to, we started to change perhaps timings and where and how we meet students you know online so it might be that particularly in school time it was kind of after tea which we wouldn't do, certainly I wouldn't be able to do normally if we were in physical space. So, I think that kind of idea of the relationship being slightly different and perhaps the boundaries being slightly blurred I think has been something worth considering. Certainly, in terms of our anxiety and worries about students you know, we're in our own homes worrying about students. Now I think most of us will take our work home with us but we try to keep our pastoral role you know quite university based. Other areas of work we're perhaps less reluctant to undertake at home and finish off at home, but when it comes to student support that's not traditionally been an area in which we as a group, we feel comfortable in bringing home yet what's happened is we've started to see that kind of pastoral role encroach into our own lives and start to get us to think and cause us worry because we are at home all the time. There are practical issues so remote referrals being more challenging. The idea of services not running in the same way so, counselling again being more online via Zoom or Teams or whatever approach. So, that lack of face-to-face contact but also the huge backlog of making sure students can access those services in good time and at a convenient time for both the university services and the student. And I think the final thing to finish off on tutor issues is the peer support. I think those of us involved in student support, you know, for a long time and looking at the delegates there are lots of names I recognise who've been very prominent in medical student support, peer support for us is incredibly important. And us being remote that becomes challenging you know we can't go and have that informal coffee or that kind of chat just to clear our heads with our colleagues and friends. It has to again be done remotely or by phone and perhaps that you know sort of perpetuates this kind of feeling of isolation, regardless of how good technology is it's not the sphere that we're used to, it's not the way in which we manage, or have traditionally managed. So, I'll hand over back to Jayne.

JAYNE

I'm just going speak very briefly in response of the situation in March when students moved home and we went to online learning. We created a standard operating procedure to recognise the changes in the system that we offer. Previously students would be reporting to a personal academic tutor twice a semester and obviously we changed that process to recognise our duty of care to the students and ensure that the support was also ongoing and more available. So, we did ask the students to check in with their personal academic tutors fortnightly. We did have some criteria to guide this whether it was academic or more pastoral based as well. If a student doesn't make contact with their personal academic tutor then a concern form was submitted. Our raising concerns process is very much structured around positive support rather than a punitive measure. So, we ensured that it was also transparent so the student would receive an email from Ed as Health, Wellbeing and Conduct Lead if they hadn't

contacted their personal academic tutor and programme leads were copied into the email as well. So, we tried to make it as transparent as possible for the students. You know we're not going behind anyone's back we're doing this because we were concerned about you, and we just needed that regular contact because we didn't see them in class. And as I've said some sessions were delivered like recorded lectures, you know we couldn't always monitor you know if they were going to be there. So, this is just to ensure that we did have systems in place so we knew that the students were ok and were checking in with us regularly as well. And as I say our continued emphasis has been on supportive not punitive measures. And I think one of the challenges has been about positive relationships with students and PATs with the students who sort of started with us in 2019, they've been on campus for six months, they knew us, we had those relationships. It's been perhaps slightly more challenging when we are online learning so those personal academic tutor relationships start in a different way as well, some of the subtleties are lost in that personal relationship perhaps as well. So, there are challenges there I think it's important to recognise that. We do have flexible structures to reflect individual relationships. So, we thought every fortnight was about reasonable, some students reply more than that and we have students who are contacting their personal academic tutors several times a week who are seeing me and Ed as well. So, we do try and have that and right through the process Ed and I you know we've offered meeting slots when students have been say at home, but they don't want anyone to overhear that they're struggling, they've been out in their cars, they've been in other environments and we've tried to tailor our meetings and other processes to reflect that so they do engage. Myself as Student Support Lead, I cover our PATs, our Personal Academic Tutors, so if anyone's absent or on leave, I have access to all their information. Again, to ensure that consistency of relationships as well. And we regularly promote mental health, like mental health awareness or mental health day, and the services that we have for wellbeing and the toolkits available to staff to support them in their role as well. So, we've got a couple of case studies but I'm conscious of time. I know that we are running towards sort of the end of the session now. These are certainly some examples that we've come up with around - Ed, I don't know if you want to say anything before we move to general?

ED

Yeah I think it's just a range, so the last 15 minutes of questions and more than happy to go through, but I think it's more that these were just to illustrate perhaps the range of issues that we've seen you know from the first scenario, you now WP students, who you know have a lot of pressure on them not in a way that's perhaps slightly unusual, they might be the first in their family to go to university and trying to find a time and space where someone can actually seek support and we can have frank discussions and how to signpost them. So, they are in the back of a car and I want to stress that we're not with them, we're at home virtually, but that's the only space that they've got inside their car. And we've seen that a lot, you know that's the safe space inside a car somewhere. Certainly, thinking about maturer students and students with carer responsibilities, parental responsibilities you know not being able to afford good Wi-Fi. You know the presumption is we all switch to remote online learning and certainly perhaps institutions didn't actually think so much as can everyone access that, I suppose that includes staff as well. And then you know thinking about the anxieties about forming these new relationships, these are all true cases for us that from a vast range over the last nine months you know anxieties around that kind of peer group development and actually the impact that was having upon that individual student

which we might see to some extent traditionally anyway but certainly this has really exacerbated it.

JAYNE

Ok. So, what we wanted to acknowledge, I mean as Ed said at the start, you know we're not experts on this, you know it's just telling you that these are issues that we're facing and anecdotally with other medical schools, we're aware that everyone else is. So, we just wanted to maybe discuss some best practices, acknowledge these challenges, share any resources and just open the conversation really about the best ways to ensure that student support is as accessible, relevant and valuable remotely as it is in person as well. So, I'll come out of the slides and we can certainly open up that discussion if anyone has any questions or anything has come in Kevin for us?

KEVIN

Great thank you Ed and Jayne. That was a really comprehensive introduction to the topic. The first question that came in that I think is quite interesting from Anne who says as a Newcastle advisor I'm worried about students reaching out if you are remote. Are you as likely to be asked for help? Then how do you build rapport and relationships online? So, any thoughts on the approaches or at least the approaches you guys have been taking in this regard?

JAYNE

I think it's that regular contact isn't it so, you know, we say fortnightly and we also have structured meeting in process. So, every new student within the first week or two of their programme is expected to have a formal meeting online with their personal academic tutor and then catching it up and so we're constantly emailing them or sending those messages out. You know, if they don't want to access that person what else is available across the institution as well. But I think it is that constant reminder you know that we are available, we want to support them and we're there to talk to them.

ED

And I think as well it's the same as we would, the only thing I'd add to that, it's exactly the same as if we were face to face as usual is you know those meetings outlining the role of that pastoral support. You know, I think a lot of students have had, particularly those who've transitioned this year from compulsory to higher education, are very unfamiliar with it just as they are normally but they are alone, they're at home, you know they're perhaps not attending as much or any face to face depending on the institution. So, I think it's again going over those bases; what's the role, how can I support you, what's our role within your development across this kind of five-six years depending on your programme. So, I think one of the things we do find is students once they know what the role is, once they know what kind of support they can get they do tend to come to us and I think it's keeping it personable but professional I suppose is the best advice I can have, that you're not that remote but there's still, this is a professional relationship and I think clearing those lines I think it's good for us because we're at home but also for the students.

KEVIN

I suppose that the follow up to that is something that we've been talking about certainly in our sort of curriculum meetings is how you monitor and identify those pupils that are not engaging because you know how do you measure engagement in a largely online environment.

ED

Yeah, I think that's something that we, and it's very challenging for schools that have large cohorts. I think firstly you need to have a good partnership with your administrative team. So, I think we very much for all live online teaching we try and do a good proportion of live online teaching, we take registers and that's the way in which we measure our attendance. And then we also run reports on the online materials through blackboard just to see you know where the students are accessing folders. That's been difficult in terms of how we phrase that and I've been certainly cautious about trying not to monitor individual sessions unless they are really core or compulsory. I think its folders, I think it's your looking to see how is a student engaging with the resources that we've provided. There's nothing to stop students from doing that and not engaging so it's not a perfect system but I think it's that regular face-to-face contact online in consolidation sessions so we often have and we can kind of see who's perhaps got outlining issues or who's perhaps not engaging very much in those and they're always keen tellers for us if they're not engaging in the consolidation sessions then perhaps they're not identifying what they need to consolidate, you know that might be a warning for us but I don't think there's a perfect answer for it.

KEVIN

So, something else I wanted to pick up on, we talked a little bit about support for us, you know, how we actually look after ourselves. And I did see one or two comments agreeing that this is a big issue and I'm hoping that Leigh will bring in Roshni who just talked about the fact that she's very grateful to ASME and other online networks for her support and I'm just intrigued and interested to sort of hear a little bit more about how Roshni - I think she's just joining us, hopefully she can hear us and be able to speak to us shortly - about how you're actually using the wider virtual networks.

ROSHNI

Hi everyone. Hi Jayne nice to see you again. Thanks very much for inviting me on audio, not video, I'm on a mobile. Yeah well, I can only speak from my point of view as someone that's been, I'm not in a substantive role, I'm quite an experienced medical educator and I'm portfolio effectively with four different medical schools across the UK which is great. But yeah it's isolating so working from home and semi-shielding and it would be really interesting to have another panel discussion I was going to put that in the chat about that because thank you for sort of discussing that today because I think it's something that's not, I've been to, my networks are you guys, AMEE, there's a lot fortunately sort of educational webinars that I've been doing since April. I've been home since February so that's kept me connected and MedEd Twitter at ASME and medical students online and stuff, and Medics Academy. So, different sort of sectors really, private and established educational. I think it is really important as obviously I've worked in universities and medical schools and you know that informal chat and having peer support, and having a line manager I'm missing that now. So, it's great to be able to talk to you guys. And you know I've learnt an awful lot this year and I'm learning by teaching online as well. That keeps me connected. But yeah, I think it's a much under-explored area and it would be good to maybe have another. I don't know if that's answered your question but that's just sort of some of my sources really, it's yeah, it's all online so there's lots of advantages of that because I can access things internationally and I connect with international things in America as well, but yeah, it's quite isolating not being part of institution.

KEVIN

Thank you Roshni that's really helpful and I think that sense of isolation certainly is something that I've felt over the last six months and that's even being plugged in to social media networks etc. but I think you know you're used to having a conference

annually to look forward to where you actually go and meet people that you've talked to online and that sort of is forever perpetually on hold at the moment. And I think that impacts us all I think in different ways depending on our own circumstances but in terms of us then being able to be absolutely top form to deliver the support that we want to deliver for our students I think that takes its toll in itself. It takes me back to things like the cognitive load, if you're into cognitive load theory and that whole idea that actually a lot of my colleagues have suddenly been thrust and been asked to deliver everything they deliver normally face to face online. And some of them are very confident at doing that because they've worked with the online technology before, but actually many are very new to it and actually that in itself is the challenge is just understanding how to work with the technology you know in this sphere.

ROSHNI

Definitely.

JAYNE

It's been an education for all of us as we're going along as well and certainly the pressures as tutors, I think from March you know Ed and I were delivering Year 2 content for our physician associates that we hadn't envisaged doing until aligned in placements later this year. But you know because they couldn't go out on placement there's all these kinds of implications which was a lot of extra work at a point when we had our existing teaching commitments as well. So, I think for staff it's really important that we recognise that. It's a challenging time in a lot of ways.

ED

And I think as Kevin sort of highlights you know if we're not well, if our wellbeing is perhaps not as good as it could be you know that impacts on the support, we can give our students, our motivation, our feeling isolated. I think on the flip side I think what it does allow us to do is give us a lot of empathy with students and certainly kind of thinking about I think traditionally our empathy very much reflects back on our own undergraduate and postgraduate learning experiences and that can sometimes be challenging. But I think this is a shared experience and those feelings of isolation, of not getting peer support whether that's colleagues you work with or other students. I think there's a lot of commonality and I think one of the things that Jayne and I have certainly done when meeting with students is emphasise that, you know, that you're not alone, I feel like this too and I think that doesn't change the professional relationship I think it's important to say we're all experiencing this and this has a profound impact upon us. And I think in the same way that students perhaps might be reluctant for more online meetings you know in some ways we've been the same. So, I can see some of the suggestions around come up you know peer support meetings, I think they're really good but it's making sure we're motivated to join them because I think everybody is meeting-ed out aren't they and all you want really is a coffee or a cup of tea with somebody in a physical space, to have a moan or a chat or whatever it is, just that support. And that's really valuable and we should never discount how important that is.

KEVIN

Absolutely. Just flicking through the chat and seeing different people posting approaches that are being used to actually look after or have touch-base sessions with their students that find them useful. So, in Glasgow vocational studies tutors are remotely meeting for approximately 30 minutes a week. That's very helpful thanks for sharing. Definitely it is a brave new world. But it's nice for contrast so Helena just putting in about the fact that actually this digital scenario is actually providing because

of the sheer number of people that you're looking after and the dispersal they actually perhaps support is easier so I think you know context again being really important in terms of what we can deliver.

ED

And I think just to add to that one of the things I would say is there are some positive experiences and one of our aims was we're thinking and focussing on the challenges but perhaps there are some positive experiences. It is, I don't know the physical landscape of your institutions but actually time and space to sit with a student, you know ours is very, it's an architect's dream but practically actually all we want is a room where we can sit down with a student and find out what's been going on and that can be, so, one of the things that using online platforms does give us is, if it works for the student, is that space and that context so that's been useful. And I think as well that technology can be useful, becoming better at technology has been positive, has been a good thing, it's been a shove you know perhaps but it has certainly changed the way, when we were planning this session one of the things we talked about was perhaps one of the things for universities to think about in future is how we use physical spaces. Is attending 300 people sat in a room listening to someone, does that need to happen, physically can we better use that physical space for something else? And I think there'll be a better integration of virtual and physical learning but I think as a consequence of how quickly we had to change the support issues perhaps didn't catch up as much as the technology that was sold to us that we could use did.

KEVIN

Yeah, I think I hear and agree. And I think Lorraine makes a really important point that a lot of us came at this, a lot of our peers and colleagues came at this from a position of exhaustion having had to work through the whole of the Covid lockdown and being asked to just magically turn everything that you did in person to an online curriculum in the space of a few weeks. And I'm sure that many of you out there are very much like us and are still beavering away just a week or two ahead of our students to make sure everything is ready to go and it's not a position of comfort. But I agree that we are starting to think about what or when if we can keep ourselves going to see the end of this sort of unusual period that we will actually have a chance to draw breath and look carefully at what we actually can keep and build back in purposefully into our practice as we move into hopefully the Covid-free world that we aspire to be walking into in the near future. So that's really interesting so Helena has said that they've actually brought their students to work socially distanced in their peer groups to help them get to know one another. And I applaud that I think that's really fantastic that you've managed to be able to do that, and we've certainly discussed it locally and the logistics were deemed to be too complicated to overcome at this point but I can see the benefit of that. One of the concerns that we've been talking about recently was the pressure on students so that actually early next year they're going to have to start thinking about accommodation for the following year but if they've not made these peer group friendship groups that they would normally have made does that make choosing where to live next year even more complicated. And do we even want to think about next year when we're not quite sure what's going on this year.

ED

Yeah, I mean one of the things that we've been able to do because its small numbers is they do get a day of face-to-face teaching. That's been challenging in the way we've written the timetable and the curriculum because we try and make sure that those sessions are, we use team-based learning as our model but certainly trying to do consolidation sessions. So, we try not to do new content on that Monday, we try and

make sure that's online so make sure everybody's got an equitable platform in which to learn because some are isolating, it's variables in terms of attendance which we monitor closely. But certainly, you know thinking about forming those relationships when we have been in you know on the face-to-face days everybody sits socially distanced with masks on, it's still a challenge. It's still not a substitute for just you know that coffee in between sessions or those discussions.

KEVIN

Absolutely. Well I'm just noticing the time and seeing that it's actually ten to and I do see that some of our attendees have had to drop off because I suspect, we know everyone's so busy. So, I expect I'm going to have to wind this up so I would just like to thank everyone who's participated in the chat. If I haven't mentioned your comment my apologies but we are reading all the comments as they come in and I see the conversation between participants which is fabulous. Just to remind you that the video of this session will be made available on the ASME website in a few days. Please do be sure to sign up to future BITESIZE sessions, our next session will take place on Monday the 2nd November at 6pm with Dr Brian Wang who's the founder of In2MedSchool and the host Dr Eliot Rees who is the TASME Chair and they will be discussing how to get involved in research as a medical student. And for more details visit the ASME events page at [asme.org.uk/events](http://asme.org.uk/events). So finally, once again my thanks to Ed and Jayne for really starting this conversation and I'm sure it will go on and I hope to see some output from the thinking that's been developed here at future ASME events. So, I will now sign off and say thank you to all of our participants and stay safe and see you all soon.

ED

Thank you very much for having us.

JAYNE

Thank you.

**ENDS.**