

Background

In 2018/19 Cardiff University commenced the pilot year for their LIC, named CARER (Community and Rural Education Route). It was launched at two sites, with five third year medical students in Bangor and seven in Aberystwyth. Both programs have continued from then, with a fourth year having just begun this academic year.

Students spend a total of nine months attached to a general practice, with a named lead general practitioner overseeing their education in the practice; to meet the standardised learning outcomes for the year they also spend one month in hospitals local to them.

As well as longitudinal clinical attachment, CARER students also carry out their other standard Year 3 projects such as their Oncology Project and Student Selected Component (SSC) throughout the year, rather than in an exclusive block of their year.

Medical Education Roles

In the 2021 round of UK Foundation Programme allocations there were introduced Foundation Priority Programmes (FPPs) for nine FY1 trainees in Bronglais Hospital that included as part of their job role a commitment to medical education alongside the standard four-month rotations through departments of the hospital.

There is also a rotation for three FY2 trainees with a medical education commitment expected alongside the traditional jobs.

These medical education roles are now being used by some of the trainees in them not only to teach third year and final year medical students in the hospital, but also the new cohort of CARER students in Aberystwyth. The programme lead and the administrator for CARER in Aberystwyth have co-ordinated with these junior doctors, including the author, to deliver a schedule of teaching sessions to the current students.



Return after CARER

CARER has now been running for a sufficient length of time that we can examine where students have chosen subsequently to do further clinical attachments and, with those students who have graduated and entered the medical workforce, where they have chosen to live and work for the postgraduate Foundation Programme.

Four previous CARER students from the Aberystwyth arm, three from the first cohort and one from the second, undertook further clinical attachments during medical school in Bronglais Hospital, such as their Assistantships or Medical Education projects during the elective period of their final year.

From the author's cohort in the Aberystwyth arm of the pilot year of CARER, one former student returned to the area to work for FY1, and has stayed for FY2; the author has also returned to Aberystwyth for FY2; and in addition there are two FY1 doctors this year in Bronglais who are also CARER graduates, from the second cohort of students in the program.

Discussion

There are many possible benefits of LICs and there are various related goals that are stated when they are designed or appraised. These include improving awareness of rural careers, and encouraging new staff into or retaining existing staff within their current site of rural practice.

With several junior doctors taking up opportunity to return to the site of the Mid Wales/Aberystwyth arm of the CARER LIC, there is an emerging narrative of students returning to their area of training to start work.

By involving themselves in the medical education in the region alongside their rotations in the Foundation Programme there is a possible emerging benefit of population or social sustainability, where former students use their unique experience and perspective as graduates of CARER. Near-peer teaching is now popular in medical education and has positive feedback from the students that experience it; the Aberystwyth arm of CARER will have for this academic year several near-peer tutors who have a precise and personal knowledge of what the area's medical students are thinking and feeling as CARER enters its fourth year.

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FY2 in Bronglais Hospital