A4 Designing a clinical anatomy and pathology curriculum for 'transition' into clinical training, through the application of First Year Curriculum (FYC) principles

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Transition pedagogy utilises curriculum approaches that aid student engagement, success and retention. This is typically applied to First Year Higher Education (FYHE) students. However, the transition from preclinical to clinical studies within many medical programs represents a similar shift in the student learning experience. Here we describe the intentional curriculum design of clinical anatomy and pathology in year 4 of a 6-year MBBS program. The six First Year Curriculum (FYC) principles of transition, diversity, design, engagement, assessment and evaluation/monitoring have been embedded within the year 4 program.

Transitioning students from the learning of foundation science to the advanced application of scientific principles is organised through integrated teaching (and assessment) of clinical anatomy, pathology, clinical examination and evaluation. This learning is contextualised within various healthcare settings: primary health, hospital inpatient and outpatient and rural placement.

The integrated teaching design provides an explicit foundation for scaffolding the transition from the preclinical to the clinical context, while utilising curriculum design principles that promote active, collaborative learning and engagement that is consistent with the clinical workplace. Assessment is aligned to this integrated approach through the use of case-based clinical practical exams, and theory papers.

Student diversity is primarily addressed through years 1–3 of the program, through the scaffolding of practical and generic skills that assist students with the demands of university study. This is supplemented in the clinical transition through a clinical mentoring program and a number of reflective activities that help students and staff to evaluate progress throughout the transition year and enable timely interventions (such as additional skills sessions) to be accessed.

Lastly, evaluation of the new curriculum is conducted regularly, especially during this implementation phase and is conducted through a combination of externally benchmarked, institution-wide, and college-specific feedback tools.

Having utilised FYC principles in the design of the year 4 program, further work is now needed to see how the curriculum impacts upon the transition to clinical study, the students' experiences, progression and the employer feedback. However, initial feedback has shown a positive improvement on students' experiences of the transition to clinical study.

No ethical approval was required.