

# Letter to the Editor Regarding the Article “What Aspects of Supervised Patient Encounters Affect Students’ Perception of Having an Excellent Learning Outcome? A Survey Among European Medical Students” [Letter]

Fatima Wasti<sup>1</sup>, Parmis Vafapour<sup>2</sup>, Mahnoor Irfan<sup>1</sup>

<sup>1</sup>St George’s, University of London, London, UK; <sup>2</sup>Barts and the London, School of Medicine and Dentistry (QMUL), London, UK

Correspondence: Parmis Vafapour, Email [p.vafapour@smd18.qmul.ac.uk](mailto:p.vafapour@smd18.qmul.ac.uk)

## Dear editor

We have reviewed Thyness et al paper titled “What aspects of supervised patient encounters affect students’ perception of having an excellent learning outcome? A survey among European medical students” (Thyness et al, 2023)<sup>1</sup> and would like to express our gratitude for their findings. As medical students in the United Kingdom (UK), we would like to share our perspectives on the study.

The study aimed to investigate the association between supervisor behaviour, students’ participation and approach, and psychological safety with self-reported excellent learning outcomes in supervised patient encounters. The authors distributed a self-reported questionnaire among medical students and reported that only 17% of students perceived their most recent learning encounter as excellent. We find this result disappointing and propose potential explanations.

One limitation is that the students were instructed to recall their most recent supervised patient encounters. To mitigate recall bias, we suggest including information on the number of days since their last patient encounter in future studies.

Another concern relates to the methodology, which relied on self-reported questionnaires. Barnsley et al<sup>2</sup> found that medical students are largely poor judges of their own performance in self-reported assessments and there may have been a discrepancy in the way students judged the category “excellent”. Exploring the meaning of excellence as perceived by medical students could provide a more accurate representation of encounter quality.

The study employed the Clinical Learning Evaluation Questionnaire (CLEQ) to measure students’ approach to learning. However, the reliability of this questionnaire is limited, as evidence for its effectiveness is derived from a single study (Alnaami et al, 2020).<sup>3</sup> Expanding the evidence base for the CLEQ would enhance its applicability across different contexts.

The study found negative associations between supervisor presence, discussion of thoughts and student participation with excellent learning outcomes. The authors highlighted a potential reason being a lack of experience-based learning (ExBL) in clinical settings. In the UK, workplace-based assessments such as directly observed procedures (DOPS) serve as a hallmark for ExBL. ExBL has been shown to have a positive influence on student motivation, confidence, and psychological safety (Dorman et al, 2019).<sup>4</sup> However, the quality and nature of the DOPs can vary significantly depending on the teaching clinicians, which further influences students’ learning.

Quantitative research like this study provides a snapshot of a specific moment and offers a bird’s-eye view of experiences. However, it lacks the context of individual experiences and fails to delve into the reasons behind each supervisor’s behaviour, which could add value to the statistical analysis.

In summary, our review of Thyness et al<sup>1</sup> paper highlights certain limitations. These include recall bias, potential discrepancies in self-reported assessments, and limited reliability of the CLEQ. While the study sheds light on the discrepancy in teaching excellence within clinical medicine, there is a risk of infantilising medical students and underestimating their prior capacities. We encourage future studies to integrate ExBL in teaching to enhance psychological safety and motivation to learn.

We sincerely appreciate the authors' insightful contributions to medical education.

## Disclosure

The authors report no conflicts of interest in this communication.

## References

1. Thyness C, Steinsbekk A, Andersson V, Grimstad H. What aspects of supervised patient encounters affect students' perception of having an excellent learning outcome? A Survey among European Medical Students. *Adv Med Educ Pract*. 2023;14:475–485. PMID: 37213207; PMCID: PMC10199696. doi:10.2147/AMEP.S391531
2. Barnsley L, Lyon PM, Ralston SJ, et al. Clinical skills in junior medical officers: a comparison of self-reported confidence and observed competence. *Med Edu*. 2004;38(4):358–367. doi:10.1046/j.1365-2923.2004.01773.x
3. Alnaami N, Haqwi AA, Masuadi E. Clinical learning evaluation questionnaire: a confirmatory factor analysis. *Adv Med Educ Pract*. 2020;11:953–961. doi:10.2147/AMEP.S243614
4. Dornan T, Conn R, Monaghan H, Kearney G, Gillespie H, Bennett D. Experience Based Learning (ExBL): clinical teaching for the twenty-first century. *Med Teach*. 2019;41(10):1098–1105. PMID: 31382787. doi:10.1080/0142159X.2019.1630730

Dove Medical Press encourages responsible, free and frank academic debate. The content of the Advances in Medical Education and Practice 'letters to the editor' section does not necessarily represent the views of Dove Medical Press, its officers, agents, employees, related entities or the Advances in Medical Education and Practice editors. While all reasonable steps have been taken to confirm the content of each letter, Dove Medical Press accepts no liability in respect of the content of any letter, nor is it responsible for the content and accuracy of any letter to the editor.

### Advances in Medical Education and Practice

Dovepress

### Publish your work in this journal

Advances in Medical Education and Practice is an international, peer-reviewed, open access journal that aims to present and publish research on Medical Education covering medical, dental, nursing and allied health care professional education. The journal covers undergraduate education, postgraduate training and continuing medical education including emerging trends and innovative models linking education, research, and health care services. The manuscript management system is completely online and includes a very quick and fair peer-review system. Visit <http://www.dovepress.com/testimonials.php> to read real quotes from published authors.

Submit your manuscript here: <http://www.dovepress.com/advances-in-medical-education-and-practice-journal>

<https://doi.org/10.2147/AMEP.S427114>