What’s been happening in AMEE MedEdPublish? - a review of the first themed issue

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Abstract

Not required.

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Introduction

The end of the first themed section of AMEE MedEdPublish seems a good place to look at what has been happening in this new e-journal over the last three months. This new, post-publication, open access e-journal was launched at the beginning of June with the objective to provide rapid publication of papers, open access and a transparent post-publication review process. It sought to encourage dialogue, share good practice, to provide an opportunity to highlight innovations and to allow the publication of cases studies, replication studies and opinion pieces.

In the period 1 June to 22 September there have been 57 successful publications attracting 25,810 page views by 3,967 users from 126 countries. Twenty-four papers have been awarded four or five star status by Reviewers and 11 papers have achieved "Recommended" status on the opinion of two or more registered Panellists. The fourteen "top-rated" AMEE MedEdPublish papers in this period have been highlighted in the recent edition of Medical Teacher (http://dx.doi.org/10.1080/0142159X.2016.1232047). This sustained early interest in AMEE MedEdPublish since its launch in June is encouraging.

First Themed Issue

The possibility of having special themes in addition to general articles was another objective of AMEE MedEdPublish. The first Themed Issue began on 1st July focusing on Community-based Medical Education.
As well as expecting an enthusiastic up-take of submissions to this open access journal, submissions were also invited three months before the starting date from international colleagues active in the field. It is here that the number of manuscripts submitted has perhaps been less than expected. Of the four themed papers published following the opening editorial, two are from Australia, one from UK and one from Singapore.

### Review

1. The first paper by Hampson from Launceston, Tasmania, ([http://dx.doi.org/10.15694/mep.2016.000051](http://dx.doi.org/10.15694/mep.2016.000051)) describes a programme for learning a less frequently taught communication skill. The report describes the opportunity in community placements for medical students to focus on the skills required when referring patients from one part of the healthcare system to another. Aspects covered in the programme include:
   - communication between primary and secondary care and vice versa;
   - using services outside the hospital setting in contributing to this;
   - reducing patients’ frustration during their route through the healthcare system;
   - maximising the use of telemedicine.

Reviewers were quick to pick-up on this initiative, quote similar examples in their own experience and suggest that the best place to see communication in action is in the community.

2. Social accountability in a medical school programme is one of the areas of a medical schools’ curriculum recognised by the AMEE ASPIRE to Excellence awards. That medical schools have a duty to the communities they serve is perhaps under-reported in the literature. In their paper, Ayres et al from Plymouth, UK ([http://dx.doi.org/10.15694/mep.2016.000081](http://dx.doi.org/10.15694/mep.2016.000081)) explore the role of a social engagement project in making a difference in the real community. The project provides community-orientated, community-based and some community-engaged experiences. Students gain new insights, knowledge and skills from both the project and from working with different healthcare disciplines. Benefits at all four Kirkpatrick levels are identified. In addition they comment that, "sending healthcare students into communities represents a radical change of practice for medical and nursing schools".

3. Ewan et al from Melbourne, Australia ([http://dx.doi.org/10.15694/mep.2016.000083](http://dx.doi.org/10.15694/mep.2016.000083)) describe the accreditation process as a way of raising the profile of the important topic of Indigenous Health in medical school curricula. They conclude by saying that, "The AMC accreditation standards act as high-level, targeted policy that supports the implementation of globally relevant and place-based activity to develop the next generation of the health and medical workforces. Indigenous-specific accreditation reform provides an exemplar to international accreditation bodies”.

4. Finally Mohan et al from Singapore, share their personal view of three different experiences in CBME ([http://dx.doi.org/10.15694/mep.2016.000084](http://dx.doi.org/10.15694/mep.2016.000084)). Learning in the community was a positive event for each and this experience appears to be positively endorsed by the National University of Singapore curriculum where medical education is progressively geared towards the incorporation of community-based medical education as part of the curriculum.

## Conclusion
It has been a pleasure to read these papers submitted for the themed issue. Perhaps an even earlier invitation letter would have attracted more submissions but of course access is open for anyone and I’m very grateful to those who have contributed this time. AMEE MedEdPublish has given a voice to workers in the healthcare disciplines who have an experience or a study to share but who may not have been able to publish through the usual channels of a printed journal.

I appreciate the complements and counter-points made by each of the Reviewers to my opening editorial in the issue. In this I suggested that CBME should enjoy wider acceptance in a medical school curriculum. These four recent publications reporting positive views on a variety of aspects of the topic illustrate ways in which the contribution of CBME continues to be recognised.

Take Home Messages

Notes On Contributors

Dr John Dent is Honorary Reader in Medical Education and Orthopaedic Surgery at University of Dundee, AMEE International Relations Officer, an Associate Editor of Medical Teacher and an International Member of the editorial board of the Korean Journal of Medical Education. His main research areas relate to ambulatory care teaching and the development of community-based education. He is currently a tutor for AMEE on the ESME–Online and the new ESME-Student courses. With Ronald Harden and Dan Hunt he co-edits the internationally acclaimed, multi-author text, "A Practical Guide for Medical Teachers" (4th ed), Elsevier, which was Highly Commended in the annual BMA Book Awards, 2010

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Bibliography/References

Appendices

Declarations

The author has declared the conflicts of interest below.

I am the Guest Editor of AMEE MedEdPublish for the theme of Community-based Medical Education.

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