

The impact of the COVID-19 pandemic on medical education

TO THE EDITOR: Torda and colleagues¹ highlight the impact of the coronavirus disease 2019 (COVID-19) pandemic on medical education, which has prompted the rapid shift to online teaching for medical students. We need to ensure that these recent changes in medical education are thoughtfully blended with the reintroduction of face-to-face teaching when it occurs.

Before integrating these changes, it is critical we reflect and review three key elements:

- Preparing students: blended learning, where online learning is combined with traditional face-to-face teaching, is likely to capture more students' learning styles but is also often associated with increased need for self-directed learning, which may mainly benefit high achieving students.^{2,3} It is critical we equip

all our students to engage effectively in adult learning to maximise the benefits of blended learning and develop engaged independent learners.⁴ This is an opportunity to develop these skills by ensuring that staged and increasing self-directedness is built into new material and forms of delivery.⁵

- Preparing educators: the attitude and preparedness of educators running or engaging in online education is crucial. As vital stakeholders, lecturers should be seen as educators and be supported and developed as such, including the training in both design and delivery of online learning.⁶
- Preparing delivery and its content: facing the option of moving material back from online learning to face-to-face learning, each move must be critically analysed to determine what is the most effective form of delivery. Historical modes of delivery need not be the default. Indeed, we have been given a once in a lifetime opportunity for a major, if incidental, review

of each part of the curriculum and the best way it can be delivered — online, face-to-face, or maybe a mix of both. As the mode of delivery is reviewed, the content can be refined and tailored for the students' needs.

Many of us know the deafening and discouraging silence when students are quiet in response to a question, both face-to-face and online. However, we are at a turning point in medical education where we must take the time to reflect and move forward with excitement regarding what has worked, and have the courage to leave behind what has not.

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