



## Elective Advisory Guidance

*This document is intended as an interim guidance. In light of the constantly evolving Covid-19 pandemic and its effects nationally and globally, we fully expect that further updates to this guidance may need to be incorporated.*

*It is also important to clarify that this guidance is a response to an extraordinary set of circumstances in which adaptations to usual elective programmes may be necessary in the short to medium term.*

The elective is an integral part of the undergraduate medical course in all UK medical schools. In alignment with the Student Selected Component (SSC), the elective delivers core learning, but, in comparison to other parts of the course, it provides students with some choice in the topic area. For the elective, students are often encouraged to experience healthcare in a different setting, with many students taking this as an opportunity to gain experience in an international setting. Across the UK, elective programmes vary in timing, length and nature of experience. Some schools may place more emphasis on clinical learning, whereas other schools encourage project-based work or give students the opportunity to engage in non-clinical activities. In some schools, electives are closely linked to the global health learning of the course.

In order to ensure the safety of students during an unpredictable time, many medical schools have cancelled elective placements for this year. Following the interruption of clinical learning and assessments, the pandemic is likely to have an impact on medical courses for some years beyond the acute period of the pandemic.

Whilst it is recognised that adaptations to the undergraduate medical course will be necessary in order to enable graduation of students at the expected time, it is equally important that students meet the learning outcomes for each component of the course in order to meet the standards required by the General Medical Council (GMC) in *Outcomes for Graduates*.

### Current challenges

Due to the pandemic, medical students have not been able to attend clinical placements since the end of March. Medical schools are currently exploring options to restart clinical placements, but it is unlikely that this will occur to a remarkable extent before July. Moreover, even if clinical placements can resume soon, learning opportunities may be more limited due to changes in placement capacity and further periods of lockdown.

In order to minimise the impact for the lost time in clinical placements on student education, medical schools are now faced with the task of modifying their courses to enable students to satisfy learning outcomes stipulated by the GMC and graduate at the appropriate time. Various strategies have been proposed, including reducing clinical placement time and using online options to provide sufficient clinical practice theory. Many learning resources have been built locally and some have been provided nationally, including [Capsule](#) and [Speaking Clinically](#). The long-term aim of these

strategies is to provide sufficient clinical practice theory so that when clinical placements opportunities do become available, they can be utilised more efficiently by students and NHS hospital Trusts alike.

### **Considerations for the elective**

At the present time, students are not advised to arrange an elective placement in international locations due to the uncertainty of the situation. Furthermore, some schools have considered repurposing curricular time previously used by Elective and SSC blocks to provide clinical teaching and other learning activities, which may have been lost due to the curricular changes. Sometimes this may have encouraged faculty to remove components of the course as a graduation requirement. Considering that each course component contributes to the learning outcomes underpinning the GMC's standards, modifications of courses need very careful consideration to ensure students still satisfy all designated learning outcomes.

### **Integrating the elective in a revised course**

It is recognised that educational components of the curriculum may need to be modified in order to free up curricular time for clinical placements. Elective placements are often considered as an opportunity for clinical learning and therefore elective time may be potentially used for educational activities focusing on such clinical study.

However, clinical placements outside the teaching facilities should be discouraged at present time and in the near future. There are several reasons for this. Firstly, in order to intensify clinical training in a limited time frame, it is preferable that students learn in a familiar setting at the local institution. Secondly, national and international providers remain challenged by the current situation. Thirdly, there is the possibility of new infection waves over the next months, meaning there is a considerable risk that students may not be able to take up placements they have organised. Finally, students are unlikely to get reimbursed by insurers for elective cancellations due to the pandemic.

Furthermore, electives should not be simply removed from the curriculum and replaced with a core clinical placement. The elective is an integral part of the curriculum and therefore such action could mean that students would not be in a position to meet the GMC's required outcomes for graduation. In each medical school the elective has its distinct learning outcomes which still satisfy the stipulated GMC requirements accordingly. Therefore medical schools need to consider carefully the learning outcomes of the elective to create learning opportunities that ensure the elective can be integrated into the revised course without detriment to the desired learning outcomes.

There are examples that have been utilised by some schools already such as short literature-based projects or online learning material in order to cover global health learning, and short blocks with a menu of pre-arranged clinical and non-clinical options locally so that students are provided with some choice in learning. The assessment may need some adaptation depending on the strategy used in the revised options. Each medical school will have its unique approach depending on the nature and focus of the elective, and should be able to make explicit how learning of the elective has been covered in the revised curriculum.

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