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## Introduction

The ageing population means all doctors, regardless of speciality, will need knowledge, skills, and attitudes to care for older people with complex health conditions.

UK medical schools have previously been surveyed in undergraduate teaching in ageing and geriatric medicine in 2008 and 2013<sup>1,2</sup>. A further survey was distributed to UK medical schools in 2021 to gain new insights into the progression of undergraduate teaching.

An essential component of preparing the medical workforce to best care for older people is by including teaching on ageing and geriatric medicine in undergraduate medical curricula.

## Aim

Here we present results of the British Geriatrics Society (BGS) national curriculum survey 2021-22, highlighting progress made in undergraduate teaching in geriatric medicine.

## Methods

All 35 UK GMC-registered medical schools at the time of data collection were invited to participate in an online survey on content, methodology, timing, and duration of teaching in ageing and geriatric medicine. The survey was structured around the 2013 BGS recommended undergraduate curriculum, for consistency with previous surveys.

## Results

30/35 of UK medical schools responded (83% response rate). Most teaching occurred in the fourth year of study (21/30, 70%).

Year Taught	Number of schools
1	2 (6.6%)
2	3 (10%)
3	15 (50%)
4	21 (70%)
5	9 (30%)
6	3 (10%)

Table 1a. The number of medical schools teaching an aspect of geriatric medicine in each undergraduate year.

Table 1b. The length of clinical geriatric medicine modules in weeks.

Module length (weeks)	Number of schools (%)
<4 weeks	10 (33.3%)
4-8 weeks	15 (50%)
8-12 weeks	1 (3.3%)
>12 weeks	3 (10%)
Not reported	1 (3.3%)

The majority (n=15, 50%) reported a discrete module for geriatric medicine lasting 4-8 weeks, an increase on previous surveys. However, several programmes have reduced the amount of in-person teaching since the COVID-19 pandemic. Notably, three schools reported geriatric medicine exposure lasting >12 weeks. Of these, two were integrated clerkships and one a dedicated geriatric medicine module.

There is increasing focus on multidisciplinary education, with emphasis on combining virtual or simulated teaching with other healthcare professions (n=7, 23%). Every school (n=30, 100%) taught at least one topic as small-group or case-based learning.

## Conclusions

- There is a trend towards increasing exposure to geriatric medicine compared to previous surveys in 2008 and 2013
- Several of the programmes reporting greater exposure incorporate geriatric medicine in an integrated clerkship rather than as a dedicated module
- Programmes demonstrated a move from didactic teaching towards small-group and case-based learning, employing a wider variety of assessment methods than previous.
- Further work includes publishing the survey results in full, as well as an in-depth analysis and interviews of exemplar teaching from different schools.

