

Audio file

[Episode 6 - Luzaan Kock \(30 Sept 2024\).mp3](#)

Transcript

00:00:14 Speaker 1

Welcome to conversations and made it the people behind the research.

00:00:28 Speaker 1

Hi lizanne. Thank you for joining us today.

00:00:31 Speaker 1

How are you doing?

00:00:31 Speaker 2

Hi, Nikki. Thank you for having me. I'm good. Thank you. How are you?

00:00:34 Speaker 1

Pleasure. I'm great. Thanks. So maybe you could just introduce yourself to our listeners. Who are you, where are you based? What do you do?

00:00:41 Speaker 1

OK.

00:00:43 Speaker 2

So I'm just on Africa. I used to be Luzon folk. I am based at the University of the Western Cape and I lecture at the University of the Western Conduct Research. I lecture and I supervise students in an interprofessional setting.

00:01:00 Speaker 1

Great. And I know that you were previously a physiotherapist. If I can say previously so your background is one of physiotherapy and you did your doctorate in physiotherapy but with an educational focus, how did that come about? How did you move from Physio into sort of health professions education?

00:01:19 Speaker 2

OK, so I think I need to start with the disclaimer up front for anything. I would like to say that it shouldn't deter from the great work that my colleagues are telling me that everything I'm about to mention, that they're still great. You are still doing wonderful work, but I think at that time I was practicing after my concert. So in South Africa you have a year.

00:01:40 Speaker 2

Community service. We have to work at the public institution.

00:01:44 Speaker 2

And after that year, I practiced in private practice for nearly two years. I didn't make my two year Mark and I started becoming frustrated that my impact was, you know, based on my patient and the family and possibly the community. And I found that.

00:02:03 Speaker 2

Wanted to make a bigger impact. I don't know if it's being a millennial where you feel like, oh, I'm going to change the world, but I just had that frustration that it was only with the people I was interacting with and the direct lines. It wasn't more than that and that frustration, I think it.

00:02:21 Speaker 2

It started annoying my supervisors because at the time I was doing my masters and I think they just felt like, oh, my word, stop. Here's an opportunity. Try this. So at that time I had no idea that I would actually enjoy health deficiency, impatient the way I am enjoying it now, ideally.

00:02:40 Speaker 2

I think at the time I would have wanted to teach in physiotherapy education because I thought that would be where I would make my mark, where I would not change the physical world and just change how we teach Physio students to prepare them for what's really out there. Yeah, when I started studying Physio I thought I was going to be the Springbok physiotherapist and you know, playing slags.

00:03:00 Speaker 2

Did not happen, but now I think the last few years and it didn't take me long. When I jump onto something new, I become really obsessed. You can you can ask people around me. I've watched one Harry Potter movie and I'm upset and I watched it over and over. And so I think that obsession just started growing on me.

00:03:20 Speaker 2

In IPE, so that's where I started. I started out as a supervisor in in the professional education.

00:03:27 Speaker 2

And I realized.

00:03:28 Speaker 2

That I actually did this module as an undergrad student, I had no idea what it was, and I started and when I did it at the.

00:03:35 Speaker 2

Time I.

00:03:35 Speaker 2

Thought group work? What do you mean? And now? Years later, I'm the one advocating for it all the time. But that's just really then helped me to make an impact that I view.

00:03:47 Speaker 2

To myself, obviously, as as a big impact where I can train students different.

00:03:53 Speaker 2

To how someone lecturers Michael, how we feel listening not you know, how strained. But the, I mean, I can change the way students are being trained and as a result hopefully transition our health system, which really private public sector, it really needs to be transformed. And so education is that.

00:04:14 Speaker 2

One place where it can start, yeah. And then obviously through research, we want to inform policies. We want to inform, you know, how to implement those policies that we read about with my masters.

00:04:27 Speaker 2

The focus was on uh, what I'm talking about. The focus was on policies and what our professionals viewed, what they view was on those policies and what we found was they knew the names of it and they viewed it as my word. It's adding to my workload when in actual fact, it's supposed to make your workload easier. But I don't want to read a 300 Word document.

00:04:48 Speaker 2

A300 page document on how to make my workload easy.

00:04:51

Yeah.

00:04:52 Speaker 2

And so research is almost like the middle man. The the people that can tell you, OK, so here's a diagram posted on your wall. This is how to implement it in a much easier way. And so I think that impact was what even unintentionally so was the impact that I was looking for.

00:05:09 Speaker 1

Yeah. No, that's so interesting because actually I was a cancer researcher Once Upon a time. And I also got to the point of being frustrated that I didn't think my research was actually going to impact on a patient. I'm like, you know, you know, looking at a a protein or a gene in a.

00:05:25 Speaker 1

And Sir, is it really going to make a difference in someones life sort of 10-15 years down the line? Maybe, but maybe not. I think being an education, you get to see that instant impact where students sort of grasp the concept and when they put it into practice. And I think with health professions education, you have both the sort of educational aspect and then the clinical aspect. So it's like it feels like a twofold.

00:05:37 Speaker 2

Yes.

00:05:47 Speaker 1

Impact. So it's a good place to be.

00:05:48 Speaker 2

Yeah.

00:05:50 Speaker 2

Yes, and you can almost you see it immediately. So when you contacting the research in so I contact research in IPE in Primary Health care settings, but I also teach the Primary Health care module. So what if I find the implementing my teaching the very next year,

much to the annoyance of the learning and teaching specialists? Cuz then I always call them.

00:06:11 Speaker 2

Help me this person help me with this because you almost want to implement cuz they feed into each other which is.

00:06:18 Speaker 2

I think possibly a lot of work, but it's exciting.

00:06:22 Speaker 1

So how did you get to ipe? So into professional education? Why that specifically, as opposed to, you know, perhaps, as you mentioned, you're wanting to maybe think about physiotherapy education. So did IPE feel like more of a strategic fit or was it just sort of happenstance that they needed a supervisor and you slotted in? Or in hindsight, do you see some sort of grand design?

00:06:43 Speaker 1

Where you know you're. You're where you're meant to be.

00:06:46 Speaker 2

Yeah. So UM, it was, there was a role and I slotted in there. I don't see myself anywhere else in the next couple of years. I absolutely love IP. If you wake me in the middle of the night, I can recite those definitions like nothing is really some way where I was supposed to be from the get go.

00:07:05 Speaker 2

Obviously needed that clinical experience for me to come in and to know why it's important, but I think coming from a.

00:07:13 Speaker 2

The A family way out the extended family that all access the public health care system. And we've seen. I've seen my granny go for a valve replacement and the doctor just speaking over the surgeon, just having a conversation with another surgeon and she's lying. They're asking me what they're saying. And you know that type of way.

00:07:35 Speaker 2

Where you realise in the moment that this is not how it's supposed to be and as a physiotherapist or physiotherapy student at the time I could translate some of the, you know, the medical job and I could delay it all.

00:07:45 Speaker 2

To a.

00:07:46 Speaker 2

But as that realization that IPE was supposed to be impeded in our education at the time which it was, but I think we just be learning new ways to do it in a better way. And so I was meant to be here from the ghetto. I probably had to take those detours to get here, but I was meant to be, and I was forced into it.

00:08:08 Speaker 2

But now no one. So they're gonna have to force me out again because I don't see myself in any other field, at least. And I think I'm very sorry for doing this, but just for, for people who are not.

00:08:21 Speaker 2

Really. You know, they're they're not well versed in IPE, but it's really the.

00:08:27 Speaker 2

It's this innovation in health professions education where students we purposely placed them together to learn with framing about each other with the goal of improving collaboration and also patient outcomes. So the idea is that postgraduation and not even postgraduation it's really being embedded in a way we.

00:08:48 Speaker 2

Encourage them to do it at the third year, fourth year level where students can practice collaboratively because it's so often expected, especially if you look at our policies. They want people to practice collaboratively.

00:09:01 Speaker 2

Don't ever talk to. They're never taught to learn together. They they're never forced to learn together. But we expect them to work together. So how is that possible? So almost that link that we are creating.

00:09:14 Speaker 2

Almost prepare students for the implementation of those 300 word documents. Yeah, in a much easier way.

00:09:21 Speaker 1

Exactly. I mean, I remember I started at the University of Cape Town and they had, I think in years 1 and 2, they would have all the sort of medical students and health and rehabilitation students working together for both year one and year 2 and year doing it sort of year three and year 4. And I remember.

00:09:39 Speaker 1

They were saying that it's important during year one and two because it's getting sort of a clear message and foundation that sort of you need to know what each other does. You're going to work together. But then there was a bit of a disconnect with the clinical UM and even I think you might have experienced that as a student. So what do you think of some of the challenges of or perhaps in the past, I don't know how much we we've come in I.

00:09:59 Speaker 1

But instead of training undergraduate students together and then yet it doesn't translate into the clinical practice, or perhaps those who are already in the the clinical setting, you know, the seniors who maybe weren't trained in IPE, they're not role modeling, that collaboration that's allegedly one of our sort of core competencies as health professionals.

00:10:19 Speaker 2

Yeah.

00:10:21 Speaker 2

So it's such an important point and I think This is why UWC is considered a front runner in IPE. So we.

00:10:30 Speaker 2

They may not speak before thinking, so I think one of the major challenges that other universities have is the fact that they don't have a unit designated to run IPE. So at other institutions it's always seen as an add on to the workload of a occupational therapy.

00:10:49 Speaker 2

Pictures work, so it's always an extra. It's a. It's a area of interest. UC has a designated unit, which means that there are resources allocated specifically for that.

00:11:02 Speaker 2

And it almost gives us the, you know, the time, the including the resources and all of those things to implement it and play around with new ideas and explore it on a full time basis as opposed to someone who still has to focus on the OT specific curriculum.

00:11:18 Speaker 1

Yeah. Yeah, I think that's super important. Actually, I didn't think of it like, that's like a sort of a structural or systemic change as opposed to just sort of like this is our philosophy. We think it's important, but they've actually invested in creating a whole IPE unit.

00:11:28 Speaker 2

Yes.

00:11:32 Speaker 1

Yeah. So yeah, I never thought of it like that. And so you are sort of leading the way in IPE. What are some of the teaching strategies you use or some of the creative ways you have embedded IPE within your curricula?

00:11:47 Speaker 2

All of my work. I'm actually working on on a paper now, and I'm so glad I sat with this paper before. So we've.

00:11:55 Speaker 2

Yeah, I think not coming from an educational background, it's always been a bit more difficult for me to marry theory to what I was doing in the classroom and then having discussions with colleagues afterwards, Simon, who tell me, you know, that's indigenous knowledge systems and I'm like what is that? And then I must Google to find out what it is. But we use a range.

00:12:10 Speaker 1

Wow.

00:12:16 Speaker 2

Because we have students from not only different backgrounds, we have students from different disciplines. Yeah, and so.

00:12:23 Speaker 2

They're starting towards different fields towards different professions, so often we even work with our law students or education students, and so it's not even that they'll be health professionals. They'll just have an impact on the patients, health outcomes. And so we use different strategies in our classroom. We even our mode of delivery is different.

00:12:43 Speaker 2

But the different strategies that we use, which I find quite exciting like I mentioned, now the the IKAS which is.

00:12:49 Speaker 2

Is.

00:12:50 Speaker 2

Something that proper young actually told me you need to read up on that a bit more before you speak about it. So I'm not even going to attempt to know everything about it or pretend to know anything.

00:12:59 Speaker 1

Yeah. Can you can you define it in sort of broad terms for our listeners and and is it indigenous knowledge systems?

00:13:06 Speaker 2

Indigenous knowledge systems, which is way you almost place it back into that community that you're going, and you you're landing to know about their health. You must reland them to know about their, about their health. So when we go out into a community, for example, Mitchells plain is one of our community.

00:13:25 Speaker 2

When we go, I think the Mitchell plane is not as informing them about healthcare. It's them explaining to us about what the current state of health is, which I think ties in with social constructivism. Yeah, in in a way. But using that indigenous knowledge to find out by the community leaders, the the people in the communities about what they, their health.

00:13:46 Speaker 2

Of the state of the health and finding out more and finding out what they think could be done to address the the challenges with the healthcare. I'm very big on social constructivism.

00:13:58 Speaker 2

I think it's such an easy one to jump on the bandwagon for. But in terms of IPE, it is what we do. We learn with from and about each other. So people open discussions using those open discussions and debates. My favorite using debates with people to just share what they think and disagree with other people and what they think is a better approach to do something.

00:14:20 Speaker 2

Is how I learn and so I just found it easier to have those open discussions, those debate.

00:14:24 Speaker 2

It's the smaller classroom setting, so we have, you know, the big lectures where the detective component is unpacked, and then we have our small tutorial groups with students use open classroom discussions. They use debates to to unpack the topics and to share their own experiences with something like a global health system.

00:14:44 Speaker 2

Or something like.

00:14:47 Speaker 2

The problems in the primary healthcare facilities, so instead of us just telling them, oh, these are the problems according to literature according to this one, as students saying when I accessed the clinic last year, I sat in the waiting room for four hours. Wow. Yeah. As opposed to telling them long waiting hours is a a problem in Primary Health care.

00:15:07 Speaker 1

Yeah.

00:15:08 Speaker 2

So that's that's a summary of what we do.

00:15:10 Speaker 1

No, that that's really interesting I think so important and even powerful and decolonial because again, you're putting the expertise with the people who are actually experiencing themselves and sort of decentralizing who's the authority.

00:15:15 Speaker 2

Yes.

00:15:22 Speaker 1

I do. I've seen a couple of your papers, so I've just. I've heard of, like, world cafes and amazing races. And maybe you could just briefly give sort of an outline of what those approaches have been. I'm pretty sure you had international world cafes where you had people joining from other countries in your IPE stations, but also then to encourage people to actually take a look.

00:15:44 Speaker 1

At your published research, if they're they're keen for more details.

00:15:47 Speaker 2

OK. Umm so I think in order for me to explain the World Cafe, I just want to give a brief overview of what our curriculum looks like. So at the first year level, we have Primary Health care, that's a theory module we students are introduced to the concepts related to interprofessional education at the second year level. We almost tease them with a little bit of practical.

00:16:08 Speaker 2

By doing a service learning module called health promotion, we'll be taking out into this a school setting and they have to do a health promotion project within a team in an inter professional.

00:16:17 Speaker 2

Team.

00:16:18 Speaker 2

So that I think that package together is almost that formal way of encouraging teamwork. Yeah. So the learning part and a bit of.

00:16:26 Speaker 1

Tactical.

00:16:27 Speaker 2

But then, like you mentioned, there was always that gap on how do we make this more practical. And so with World Cafe, this was actually something of I was a student at an event. The opportunity to be part of it as a student. But when students come together, we used to do it in person in our main or when students would sit around the table and discuss the patient case. But now we do it.

00:16:47 Speaker 2

Virtually so we are reaches as far as the US and we come together on zoom and we discuss a patient case, we start by debunking this around our profession. So people would say physiotherapist.

00:17:00 Speaker 2

Message and please play with kids and we would sit and discuss and debate and just share a bit more about our disciplines and then we throw up a case study. We and those case studies are thrown up by an Inter professional team as well. So it's not Physio focus to OT focus that those disciplines are all represented in this case study.

00:17:09 Speaker 1

Fantasy.

00:17:21 Speaker 2

And students would sit and plan an intervention for the patient. And so those are world cafes. It takes different formats as you've mentioned. So that's the traditional World Cafe. But then we have an amazing.

00:17:32 Speaker 2

Guys, which was something we used to do on campus. We the students start off at one spot in our minor and they receive a clue and this clue would say this discipline plays a role in developing a diet for.

00:17:46 Speaker 2

All patients and the students would all run from our main wall all the way to the Dietetics department, where they received the next clue, and then they ran all the way and then COVID datas and we obviously had to change our strategy and that.

00:18:02 Speaker 2

Really lead us to something that I'm very proud of. We we have a virtual race and that we knew I have to mention him. He was one of the the people that told me. Of course you.

00:18:12 Speaker 2

Can.

00:18:13 Speaker 2

Do it online. Ohh, and he said at the writing retreat we didn't do much writing at that retreat because we spoke about this amazing race, the.

00:18:22 Speaker 2

Amazing. Amazing days. And so students started in the main zoom room. They receive a link to safe example YouTube video and in the YouTube video they'll be the instructions at the end and then they click on the link and that link will take them to Facebook and Facebook will take them to Twitter and then to.

00:18:38 Speaker 2

Google forms and different platforms, so they would erase virtually in order to get back to the main zoom room.

00:18:44 Speaker 2

At the end, that's amazing.

00:18:46 Speaker 1

That's so cool.

00:18:46 Speaker 2

Yeah. So it's it's been a lot of fun. It goes a lot of sleepless nights, especially the planning and making sure that the sling actually takes you there and the settling. But it was it's so much fun, even though I don't sleep for like.

00:18:52 Speaker 1

Yes.

00:18:57 Speaker 2

A week before.

00:18:58

4.

00:19:00 Speaker 2

Just making sure everything's done properly, but there is a lot of fun and students do that in interprofessional teams as well, so they they run the race together and they say OK, but then obviously there's an educational component when they get to the different points. So when they get to Facebook, Facebook would tell them this is the patient scenario.

00:19:18 Speaker 2

Comment with your treatment plan for the patient and then as a team they discuss what the answer would be and.

00:19:24 Speaker 2

And in the post it and then they get the the next clue. So that's how amazing rice. Then we also have an ethics component, which was usually run by Prof the young. Yeah, she did those ethics well, cafes, but she's since retired. So we've taken over that as well. And that also takes different formats. Like I mentioned I may have.

00:19:44 Speaker 2

In this I love sport. I can't do it physically, but so we had ethics in Sport World Cafe. We spoke about how your role changes from being a health professional in hospital to.

00:19:56

The.

00:19:57 Speaker 2

Physiotherapist for a rugby team. What does your ethical principles then? How does that differ from being an individual physio to a team physio? So that was the first one then? We also had a World Cafe that looked at research ethics research. So what is the ethical principles look like when you're conducting research? So autonomy. What does that look like when you're writing your ethical?

00:20:20 Speaker 2

Statement. What is beneficence look like when you are conducting research and then we obviously have the normal yeah, epics or cafe where we just we share things like autonomy. What is the definition? How does it apply in healthcare? So that's the ethics. All cafe and then our next World Cafe which is actually a global cafe is.

00:20:40 Speaker 2

Next Monday, we we are doing an F3 vibe, so Vibe is virtual interprofessional education and it's a team based at Yale or Yale University. And they started a a African vibe. So after.

00:20:41

Oh.

00:20:57 Speaker 2

25 and we get together every once a month. I think we get together and we plan a case study, and that case study is actually a video and the video is shot by one of the universities in South Africa. And that video shared with students and they get together virtually. And they discussed their patient in interprofessional teams, but also looking at the.

00:21:19 Speaker 2

You know that competitive health systems where we found that one year just sorry just to touch on an example. One year a student was saying that why didn't they just getting a?

00:21:30 Speaker 2

You know those? I don't even know what to call it, but the thing that you put on your staircase, that buggy thing you could only staircase and you can just go upstairs. I've only ever seen it on law and order.

00:21:35 Speaker 1

Yeah, on this.

00:21:37 Speaker 1

Like a mini.

00:21:38 Speaker 1

Yeah.

00:21:40 Speaker 2

And they were saying that no, just put one of those on the patients house. We will, like, put the patient has in the shack. What do you mean? So just things like that that helps students to see so that the global health systems and what that looks like. And if you can't pay what a physiotherapist looks like in South Africa compared to a physiotherapist.

00:22:01 Speaker 2

And.

00:22:02 Speaker 2

America, what they look like and how they roll stuff. So that type of discussion in takes place. So each World Cafe has a different format and students can take different learnings out of each one. So you have students joining from the first one to the 4th 1 you have students joining for one only, but it's a.

00:22:18 Speaker 2

Informal way of encouraging discussion in the professional discussions.

00:22:22 Speaker 1

Yeah. No, I'm super impressed. I do think you're really leading the way worldwide and it's so great to hear about these international collaborations sort of modeling the principles of IPE, but also again seeing South Africa as an expert in South African healthcare. And you know, vice versa. So again.

00:22:35 Speaker 2

Yes, yes, yes.

00:22:37 Speaker 1

You're sort of. I'm very consistent in your IPE philosophy throughout, so thanks for sharing, and I encourage people to look at Liz's publications if you're interested in any more of the details or to be in contact with her for future car labs. Uh, but any lost words on IP EE or maybe reflecting on your happenstance.

00:22:57 Speaker 1

Turning into health professions, education. Any reflections or lessons or encouragements, or how to implement IPE in in someone else's setting, or to encourage people to reach out to you? It's really sort of what last word do you have for listeners?

00:23:12 Speaker 2

I think for me, health professions, education, like I've mentioned, wasn't something that was Evan. The cards. For me, it wasn't something that I.

00:23:22 Speaker 2

Ever thought of doing? My parents are both educators in a high school setting and I always thought I will not be.

00:23:28 Speaker 2

A teacher when I will.

00:23:31 Speaker 2

And I think now at these, I mentioned my husband in the week I told him, have you ever seen someone love the job this much? I genuinely love my job and I think it's once you understand that you are doing.

00:23:44 Speaker 2

Good work that it. It really makes a difference once I can, once you can see the impact and so.

00:23:51 Speaker 2

You don't realize until you start knowing more. I think once I started learning about things related to education, health, professions, education, to be more specifically, more specific. But things related to education, I would never have known about social constructivism when it's something that I do, when we sit around the table, that's something we do we learn from.

00:24:14 Speaker 2

Well, no, this is the detergent I use and this is the detergent I use. And then we start chatting about it. Oh no, that's rubbish like that. But that's something we apply in our everyday life.

00:24:24 Speaker 2

But the more you engage in conversations, someone like Nikki, the more you start knowing more about it, and then you realize that, oh, that's actually good. This is actually a lot of fun. This is something I enjoy doing. And so I think.

00:24:40 Speaker 2

Something that it's still something I often reflect on.

00:24:44 Speaker 2

We this is not. We are supposed to be according.

00:24:47 Speaker 2

To.

00:24:48 Speaker 2

18 year olds on the sort of studying physiotherapy I was supposed to be rubbing, rugby players, leagues and flying to France. But I I can't picture myself doing anything else and so I think it's just having an open mind and being open to learning more.

00:25:04 Speaker 2

And obviously, being open to making a fool of.

00:25:06 Speaker 2

Yourself, which is.

00:25:08 Speaker 2

Something that no one warns you about that rejections will come that watch interviews will come, but it's just something that our professions, education, and academia in general was the one place that really showed me my strengths, but also all.

00:25:23 Speaker 2

My million floors and and most pushes me to to want to pick.

00:25:30 Speaker 2

Or address those flaws and and not just Sol and Ohh. Well, something. Oh, that's just a negative aspect of me. We'll deal with it. No, it's something that you actively want to address. Allison. You're not a good writer. What do you mean? I'm gonna work on my writing. It's just that's the only place. Where.

00:25:49 Speaker 2

That it could.

00:25:50 Speaker 2

Something that that pushes you to do better and you always want to do better. So at this point, I probably shouldn't tell everyone to come, because then there's gonna be no one practicing physio. But if you are interested in joining our proficiency education, that is, that is really it is so fulfilling for me at least. And I think for you and I think.

00:26:11 Speaker 2

A lot of people that I speak to, they they really do enjoy.

00:26:14 Speaker 2

And then you get to go to Sai and places like that, which is a lot of fun.

00:26:19 Speaker 1

Yeah. No, your, your joy and your passion is very clear and your growth mindset and being sort of vulnerable and authentically you. Thank you for for being willing to share that and is encouraging. I feel incredibly encouraged knowing that like you're an academic in South Africa and the work that you're doing to transform health systems in South Africa.

00:26:36 Speaker 1

Relevance to a global audience, and I think This is why I feel so.

00:26:40 Speaker 1

Passionate about health professions education in South Africa and in the global S because I really am so proud of the work you guys are doing. It is sort of cutting edge, leading worldwide and so that's why, thank you for giving me, you know, 20-30 minutes of your time to amplify some of the great things you're doing. Thanks, Suzanne.

00:26:58 Speaker 2

Thank you so much, Nikki.

00:27:00 Speaker 1

And just to be clear, so she mentioned Simone, that Simone Titus Dawson, we interviewed her in a recent podcast.

00:27:06 Speaker 1

And then Professor Joyce. Linda young. I'm from the University of the Western Cape, in case you're interested in following up on some of their research. And then Prof Michael Rowe. And he's based in the UK now. But these are people, if you're interested in, in looking up on their work, too, you're welcome to to Google away and see what you find. Thanks, lizanne. Thank you.

00:27:26 Speaker 1

OK.

00:27:31 Speaker 1

I am Danika Simms, your host and producer.

00:27:34 Speaker 1

Thank you for joining conversations in Madrid.

00:27:38 Speaker 1

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00:27:40 Speaker 1

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00:27:47 Speaker 1

In contact with me.

00:27:49 Speaker 1

Contact details can be found in the show notes.

00:28:06 Speaker 1

Are you passionate about education? Are you interested in conducting educational research? Are you considering obtaining a formal qualification and health professions education?

00:28:17 Speaker 1

The University of Oxford offers a part-time 2 year Masters in medical education through the Department of Education and Partnership with the medical school.

00:28:28 Speaker 1

We introduced students to numerous topics, theory and evidence from the field and support them in conducting their own educational research project. For more details, visit the Department of Education Web page. Links can be found in the show notes.