

Incorporating medical leadership and management into the UK undergraduate medical curriculum

Elliott Yann Ah-kee¹
Amir Asif Khan²

¹Monklands Hospital, Airdrie,

²Glasgow Royal Infirmary, Glasgow, UK

Dear editor

We read with high interest the letter by Singh et al¹ which advocates a mandatory year studying for a BSc in management, within the UK undergraduate medical curriculum. The authors have supported their proposition with compelling figures from a recent National Health Service (NHS) report, which is expecting a £30 billion funding gap by 2020/2021.

We strongly believe that nowadays, leadership and management skills are crucial within the NHS and have been shown to positively impact the overall performance of doctors appointed to hospital boards of directors and clinical outcomes.² Furthermore, we agree with the authors that a lack of knowledge of the NHS structure can be efficiently addressed by incorporating medical leadership and management (MLM) early during undergraduate training.

However, we believe that a mandatory year studying management within an already overcrowded undergraduate curriculum is not realistic and feasible. Moreover, several identified barriers to the implementation of such education, including negative attitudes held by both doctors and students toward MLM still need to be addressed.²

Different teaching initiatives have previously been implemented with varying degrees of success, but MLM education still lacks consistency and current literature on how to incorporate this into the undergraduate curriculum, is scarce.³

In a recent national survey of UK medical school faculties and students, Stringfellow et al³ reported that over 70% valued the importance of MLM within the curriculum, hence creating a foundation for education. In addition, the study investigated potential methods of teaching and assessment that could be used for MLM incorporation in undergraduate training. Preferred methods included experiential learning or simulation, quality improvement projects, and student audits. The study concluded that curriculum changes could be achieved by devising new competencies for future editions of General Medical Council's "Tomorrow's Doctors". This could require input from professional bodies, including the General Medical Council, Faculty of Medical Leadership and Management, and NHS Leadership Academy.

In conclusion, we would also like to highlight the importance of MLM within the UK undergraduate medical curriculum. However, further work is required to implement a nationally cohesive MLM program that is evidence-based, in UK medical schools.

Correspondence: Elliott Yann Ah-kee
Monklands Hospital, Monkscourt Avenue,
Airdrie, North Lanarkshire, ML6 0JS, UK
Email elliottahkee@gmail.com

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The authors have no conflicts of interest to disclose.

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