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**Article:**

Brown, Megan El, Archer, Rebecca L and Finn, Gabrielle M orcid.org/0000-0002-0419-694X (2020) A virtual postgraduate community of practice. Medical Education. ISSN: 0308-0110

<https://doi.org/10.1111/medu.14214>

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Article type : Medical Education Adaptations

### **A virtual postgraduate community of practice**

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This article has been accepted for publication and undergone full peer review but has not been through the copyediting, typesetting, pagination and proofreading process, which may lead to differences between this version and the [Version of Record](#). Please cite this article as [doi: 10.1111/MEDU.14214](https://doi.org/10.1111/MEDU.14214)

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**What problem was addressed?**

During the COVID-19 lockdown one community of homeworkers at risk of being overlooked in contingency planning is that of postgraduate student researchers, known to suffer from higher levels of mental ill-health than the general population. Physical distance from a supportive network of supervisors, peers and colleagues holds the potential to negatively impact postgraduates' health. This is exacerbated as international and national networks for medical education research students are sparse, and the majority of

student support is sourced locally, through involvement in a medical education community of practice. This intervention sought to mitigate the negative influence of social isolation amongst medical education PhD students at one UK medical education research unit.

### **What was tried?**

In line with the move to online communication, we sought to develop a virtual postgraduate community of practice for medical education PhD researchers. Barnett et al's 7-step framework for implementing an online community was used to structure creation of this network. In order to ascertain need, PhD research students at the Hull York Medical School (HYMS) completed individual online COVID-19 impact assessment forms. This assessment was designed to identify student projects that may be negatively impacted by COVID-19. During analysis it became clear some students felt unsupported in a time of such great change. In response, weekly online team meetings were initiated, facilitated by the director of the unit, and hosted in Zoom (in line with Step 1: Facilitation, Step 2: Champion and support, Step 3: Clear goals, and Step 4: Broad church, of the 7-step framework). These meetings provided a forum for postgraduate students to discuss progress, and any issues, with more senior members of the team (Step 5: Supportive environment). Some issues did arise in scheduling this meeting- accommodations were made to account for international homeworking, although with some students in key-worker roles, and some students' childcare responsibilities, full attendance has not always been possible (Step 6: Measurement, benchmarking and feedback). For more asynchronous support, two WhatsApp instant messaging groups were created - one to which only students have access, encouraging confidential peer support, and another including all team members. Alongside facilitating technical support (Step 7: Technology and community), WhatsApp groups have improved social support- morale-boosting messages are frequently posted and sharing of non-work, non-COVID related good news is encouraged to maintain a sense of camaraderie.

### **What was learned?**

The online postgraduate community of practice at HYMS has been received positively, increasing morale and satisfaction with the levels of support on offer. Requests have been made to maintain a virtual postgraduate community of practice following a return to face-to-face working. Facilitated contact has improved communication between peer collaborators. Improved virtual support has been of particular benefit to those for whom home working is preferable in a non-COVID world. Prior to establishment of

this online community of practice, the necessity of some to engage in distance study also distanced them from the physical community of practice that comes with campus-based research. Establishing an online community of practice has increased feelings of collegiality, particularly for those who have been previously marginalised through lack of physical presence.

**References:**

Barnett S, Jones SC, Caton T, Iverson D, Bennett S, Robinson L. Implementing a virtual community of practice for family physician training: a mixed-methods case study. *Journal of medical Internet research*. 2014;16(3):e83.