

To RCOG members and fellows,

During the COVID-19 pandemic, I was responsible for coordinating the medical student volunteer effort at my hospital trust. Several of the volunteers were specifically recruited to help within the maternity department. Their enthusiasm and efforts have made a lasting effect on our department. Supporting undergraduate education through clinical placements in the next academic year is going to be a challenging one requiring us all to think in new ways. I feel that their key reflections in this letter might help the RCOG and other Royal Colleges, Trusts and Medical Schools shape clinical placements for medical students during and in the wake of the pandemic.

'We are writing to you as a group of medical students who volunteered at a London hospital during the COVID-19 pandemic. We volunteered there for almost three months, in a variety of roles, but principally in the maternity department.

Whilst on the Labour ward our main role was to act as a 'runner'. This role was created with the aim to reduce the transmission of SARS-CoV-2 and to prevent the waste of Personal Protective Equipment (PPE) and time, for example by fetching equipment for midwives or doctors so they did not need to leave the birthing rooms and change PPE. This was especially valuable in emergency situations to source equipment, prevent unnecessary crowding and assist with communication between those inside and outside of the delivery room.

We felt like valued members of an interprofessional team that consisted of doctors, midwives, HCAs as well as runners. Being so integrated into the team for so long led to considerably more learning opportunities than on a regular placement. It also allowed us to cultivate relationships with the staff and gave us a sense of belonging in the multidisciplinary team, both of which have been shown to enhance learning^[1,2,3]. Staying at one hospital site for the duration also enabled us to feel a sense of belonging that we have not developed on shorter clinical placements in the past. Specific learning opportunities included ad-hoc sessions with doctors, watching and assisting with Caesarean sections and watching and assisting midwives in the birthing rooms, to name a few. These were particularly valuable for those of us whose Obstetrics and Gynaecology placements were cancelled due to the pandemic.

We would also suggest that our experience may well impact our choice of career. Spending time on the Labour Ward allowed us all to get a better sense of the speciality, in terms of what life is like for the doctors, characteristics of the patient population and the general nature of the work. Given Obstetrics and Gynaecology has one of the highest attrition rates of any speciality (30%)^[4] and that 9 out of 10 obstetric units report a gap in their middle-grade rota^[4], recruiting more graduates to the specialty is important. Given also the role that placements play in students' career choices^[5], we

would suggest that implementing placements in which students are integrated and useful members of the team may make a substantial difference.

It was a privilege to contribute even a little bit to the national effort to care for those in need in these difficult circumstances. Our primary aim as volunteers was to assist where help was needed, so we are deeply grateful for having been able to learn so much at the same time. We hope that these brief reflections on our experiences might prove useful in navigating further uncertainty in the months to come.'

Yours faithfully,

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