

Research on deepening the education of ideals and beliefs in rural free orientation medical students' employment guidance courses

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Abstract. Under the background of implementing the strategy of healthy China and rural revitalization in the new era, the education and management of free oriented medical students in rural areas has been paid more and more attention. The employment guidance courses for free orientation students in rural areas are becoming more and more standardized, and the class schedule has been developed from scratch, but the course design, especially the interaction between teachers and students during online teaching, is not sufficient. The conclusion of the study is that the free orientation medical students' employment guidance courses in rural areas should strengthen the ideal and belief education modules, tailor-made career planning, and use experiential teaching methods to train students to grow up to be good at treating minor diseases, being good at treating serious diseases, being good at managing chronic diseases, Qualified grassroots general practitioners who turn from acute illness to improvement.

Keywords: Rural free medical students employment guidance courses ideals and beliefs

1. Introduction

In the context of the implementation of the Healthy China and Rural Revitalization strategies in the new era, the education and management of free orientation medical students in rural areas has received more and more attention. As future grassroots general practitioners, they will play an important role in guarding national health care and helping rural revitalization in the post-epidemic era. During the online teaching, the research team selected a province in East China for research. There are three undergraduate-level medical colleges and universities in this province that undertake the education and training of rural free-oriented medical students. The group carried out investigations and mastered first-hand data and materials.

and communication between the investigators and the students, the questionnaires are distributed, and they are helped to understand and guide them to fill in the questionnaires. A total of 1,000 questionnaires were distributed. Finally, in the statistics stage, after excluding invalid questionnaires, a total of 782 valid questionnaires were collected. Of these, 57.16% were men and 42.84% were women. The number of people surveyed in the freshman to fifth grades is about 20%, and the number is basically the same. This article only discusses the ideal and belief education module, and the rest will be elaborated in other papers.

2. The structure of text

2.1 Research object and data source

The research is divided into questionnaires and interviews. Specifically investigated the current employment guidance courses for rural free orientation medical students at the undergraduate level. A total of surveys included three medical schools in the province, from freshman to fifth year grades. After in-depth exchanges

2.2 Analysis of survey results

2.2.1 *Rural free oriented medical students have an obvious willingness to perform the contract.*

After graduation, what attitude should they take to serve the grassroots medical units? 43.09% of the students choose to be passionate, 40.03% choose to be happy with the situation, and 13.81% Students choose to settle down temporarily. Only 3.07% of the students are pessimistic and disappointed. They choose not to work hard and muddle along.

Through the data, it is not difficult to find that the vast majority of free orientation medical students in rural areas have a positive attitude towards returning to grassroots work after graduation, and their willingness to perform contracts in good faith is obvious. According to the interviews with current and graduated rural free orientation medical students, nearly 100% of the students in this major come from rural areas, and most of them return to their hometowns to work in township health centers. According to the training agreement signed with the targeted local health committee, after completing the standardized training of general practitioners (generally three years), they will return to the targeted township health center for three years. Many students do not understand the current treatment and career development and promotion opportunities in township health centers, causing them to panic, thinking that their majors will be abandoned if they work at the grassroots level. The survey shows that the group of students who choose to settle down temporarily and are pessimistic and disappointed are the key points that teachers of employment guidance courses need to pay attention to. Choosing to settle down temporarily is whether you don't understand the actual situation at the grassroots level or intend to breach the contract. Those who are pessimistic and disappointed may also involve students with academic difficulties. Only by understanding the reasons can we accurately implement educational countermeasures, and provide targeted and classified guidance in the process of taking employment guidance classes.

2.2.2 *Low career confidence among rural free orientation medical students*

Regarding the question of whether they can rely on their own efforts to improve the level and current situation of grassroots medical care in the future, 12.92% of the students are very confident that they choose to be able to, and 67.65% of the students choose to do their best. 13.68% of the students chose to be uncertain, and 5.75% of the students believed that their efforts could not be changed and improved. It can be seen from this that nearly 20% of rural free orientation medical students have insufficient career confidence, which reminds educators to pay special attention to this group of students in the process of carrying out employment guidance courses. Through the interviews with the students, the research team learned that no matter whether they are urban or rural grassroots people, their social stereotype is that they have to go to

the tertiary hospitals in big cities no matter how serious they are, and they will not regard grassroots township hospitals as their own. The first-choice hospital for medical treatment thinks that the facilities of grass-roots township health centers are relatively backward, and the number of patients is relatively small. As a clinical medical university graduate at the undergraduate level, it is difficult to apply what you have learned and to improve your clinical practice level.

2.2.3 *It is not clear how to practice the original mission of rural free oriented medical students*

In answering the question of how to promote the craftsman spirit of general practitioners at the grassroots level, 50.26% of the students agreed to use benevolent medicine and benevolent skills, dedicate their lives, and pursue excellent team spirit and innovation Spirit to carry forward and craftsman spirit. However, it is not clear enough how to fulfill the original mission in practice. Through simultaneous interviews, we learned that the current course design is still mainly based on theoretical teaching, especially since the outbreak of the new crown pneumonia, the school has adopted online teaching most of the time, and the way of online teacher-student communication has affected the teaching effect to a certain extent .

3. Analysis on countermeasures for deepening the ideal and belief education module of free orientation medical students' employment guidance course in rural areas

3.1 The curriculum design of employment guidance course strengthens the interpretation of national policies.

In 2010, the Ministry of Education, the National Development and Reform Commission, the Ministry of Health, the Ministry of Finance, the Ministry of Human Resources and Social Security and other departments issued the "Implementation Opinions on Carrying out the Free Training of Rural Order-Oriented Medical Students" in medical colleges and universities for more than ten consecutive years. The training work focuses on cultivating health professionals engaged in general practice for township health centers and below medical and health institutions [1]. In recent years, various provinces and cities have issued some local policies according to the actual situation. Some preferential policies have been introduced for rural free-oriented medical students to go to graduate school, join the army, and promote their professional titles after graduation. Because the rural free orientation medical students in various provinces basically work in the province where they are trained during their post-graduation service period, there is almost no cross-provincial exchange. The employment guidance course of this major should incorporate policy interpretation into the teaching content,

and invite experts from relevant departments of the Provincial Health and Health Commission to give authoritative interpretation, so that students in school can fully understand the policy, understand the future working environment and related treatment conditions, and eliminate confusion and confusion. Hesitation mentality.

3.2 Expand the path of the second class of employment guidance class, and give full play to the advantages of alumni resources.

In addition to classroom teaching, the employment guidance course for free orientation medical students in rural areas should actively expand the development paths and channels of the second course. On the one hand, it can be innovation and entrepreneurship training programs for college students, Internet + competitions, challenge cups and other innovation and entrepreneurship competitions, and social practice activities in the countryside. Through such competitions and activities, students go deep into the grassroots in this way. Use their vision and personal experience to feel the progress and improvement of primary medical care; on the other hand, they can also organize alumni exchange activities in different dimensions. In the post-epidemic era, more attention should be paid to the advantages of alumni resources. According to the investigation team's interviews, since the outbreak of the new crown epidemic in 2020, nearly a thousand rural free orientation medical graduates trained in the province have played a prominent role in grassroots medical and health career positions, and a large number of advanced models have emerged among them. They give up their homes for everyone, and guard the lives and health of the grassroots people with love, patience and superb medical skills [2]. In the second class of the employment guidance class, these outstanding alumni can be actively invited to return to the school to communicate with the current students, use their personal experiences and typical deeds to inspire the current students, and call for learning from them.

3.3 Establish and improve the rural free orientation medical student employment practice base.

The above survey shows that rural free orientation medical students are not clear about how to fulfill their original mission, so it is necessary to expand and establish a sound employment practice base. Taking this province in East China as an example, the province has 20 standardized training bases for general practitioners and 1,356 township health centers (2020 data) [3]. Colleges and universities that undertake free employment guidance courses for targeted medical students in rural areas can contact these bases and township health centers to establish a number of normalized employment practice bases. The employment practice base and the second classroom form a joint force, and the education of ideals and beliefs and the education of craftsmanship are integrated into the curriculum of employment guidance courses. According to the grade characteristics of students, different employment scene experiences and role experiences can be designed. Rural free orientation medical students experience the craftsman spirit of "doing

one line, loving one line, doing one line, refining one line, persisting in practicality, being pragmatic and capable, and meticulously crafting" in an experiential way in the practice base. To fully tap the modern value connotation of craftsman spirit from multiple and multiple angles, and empower the free employment guidance courses for medical students in rural areas.

4. Conclusion

Through the above contents, the following conclusions can be drawn.

(1) Remind educators to increase employment guidance for talents such as rural order-oriented free medical students. For 50 years of career planning, long-term employment guidance for rural free orientation students cannot be ignored just because they will serve at the grassroots level after graduation. The education of ideals and beliefs in employment guidance courses needs to be further strengthened and deepened, and the effect of experiential education is better [3]. (2) Be sure to combine the interpretation of national policies with the experiential teaching of the practice base. Let the practical links and paths of employment guidance courses be continuously extended and expanded, so that rural free orientation medical students can learn by doing and learn by doing, and experience a sense of professional accomplishment and professional honor through internships.

(3) Previous surveys and studies have shown that the people at the grassroots level are full of expectations and warmly welcome the return of rural free oriented medical students, which suggests that the use of survey data in employment guidance courses encourages and guides rural free oriented medical students to take root in the grassroots, Serve the grassroots, let the youth bloom brilliantly in the fiery practice of building a modern socialist country in an all-round way.

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