



**QUEEN'S
UNIVERSITY
BELFAST**

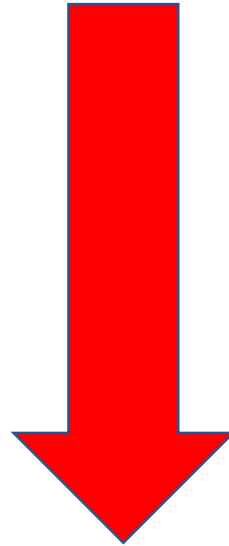
Annual meeting of GP Clinical Tutors

Zoom

2nd September 2020

For Attendance (& SUMDE Payment)

Please put your Name and Practice Code in the chat below



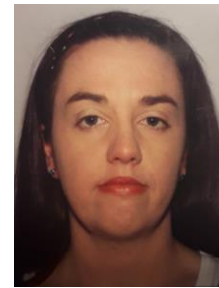
The #QUBGP Team



**Eveline
Burns**



**Cathleen
Agnew**



**Christina
McQuillan**



**Grainne
Kearney**



**Jim
McMullan**



**Louise
Sands**



**Finbar
McGrady**



**Carla
Devlin**



**Jenny
Johnston**



**Helen
Reid**



**Neil
Heron**



**Nigel
Hart**

***Clinical
Skills &
Simulation
Team***



**Gerry
Gormley**



**Diane
Wilson**



**Alyson
McVeigh**



**Janet
Rogers**



**Davina
Carr**



**QUEEN'S
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BELFAST**

Programme

Welcome

QUB/ RCGPNI Robin Harland Award Winner

GP Tutors Perspectives: Focus Groups & Town Hall Meetings

Horizon scanning: Training Doctors in the time of Covid

Allocations: where we stand and how we will proceed

New Online Clinical Resources for GP

Practically Speaking

Clinical Attachments Sweep:

Year 4&5 (incl. Catch-Up Fortnight)

Year 1&2 Family Medicine

Year 1&2 Clinical Skills

Year 4 CCTV

Wednesday Case Discussions & ECHO

The GP Sub-Deanery Pilot – Federation Support Unit

Ulster University GEMS 2021

Q&A

Closing remarks

Web address: <https://www.med.qub.ac.uk/wp-gp/> Email: gpadmin@qub.ac.uk

Prof. Nigel Hart

Dr Laurence Dorman (Chair, RCGP NI)

Dr Jim McMullan

Prof. Nigel Hart

Mrs Eveline Burns

Dr Helen Reid

Dr Louise Sands & Dr Miriam Dolan

Dr Helen Reid

Dr Grainne Kearney

Dr Diane Wilson

Dr Carla Devlin

Dr Jim McMullan

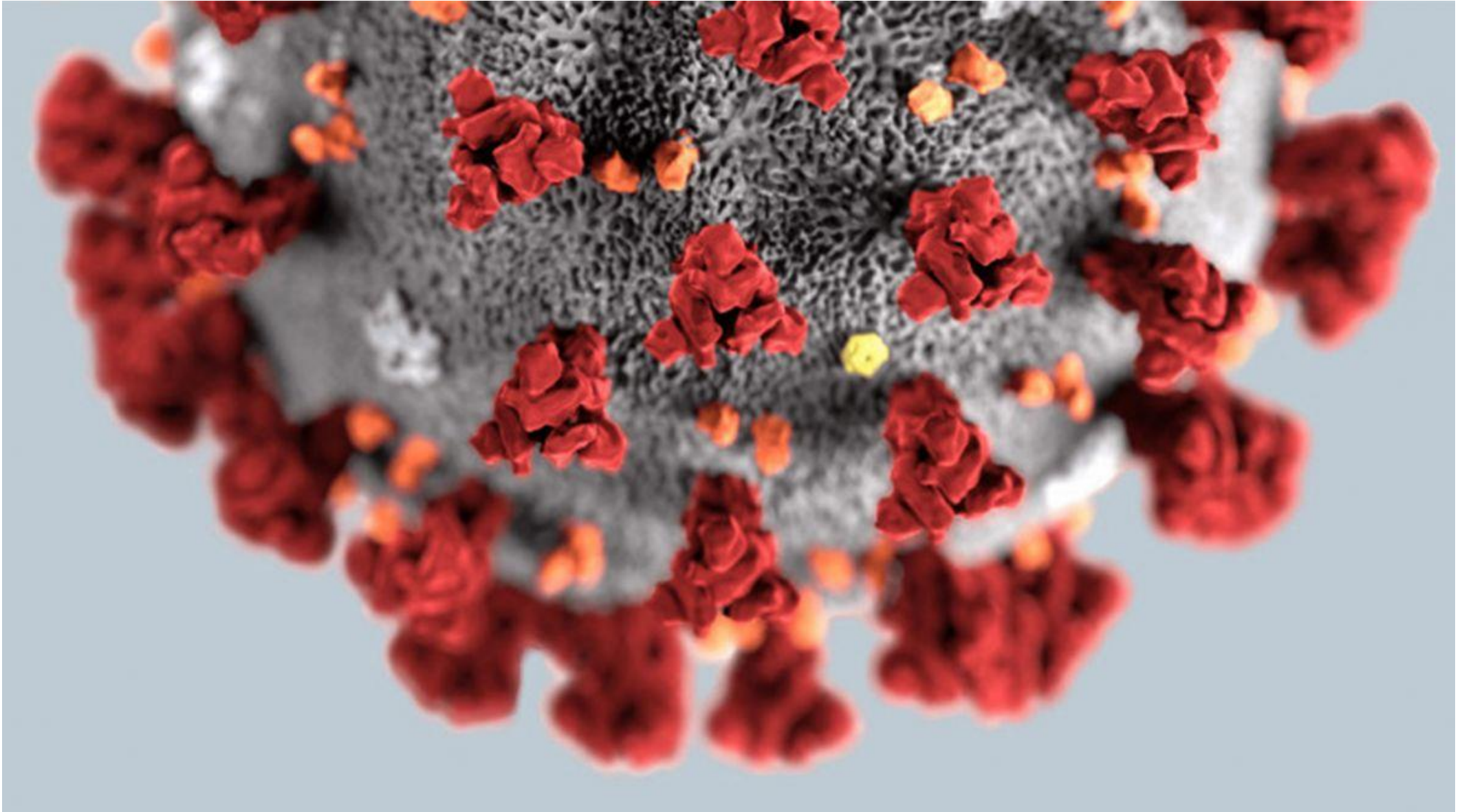
Dr Davina Carr for Dr Claire Loughrey

Prof. Louise Dubras

Dr Grainne Kearney

Dr Jenny Johnston





**The Robin Harland Prize
for
GP Tutors
for
Excellence in
Undergraduate Medical
Education**



Dr Laurence Dorman



Chair of Northern Ireland Council of The Royal College of General Practitioners

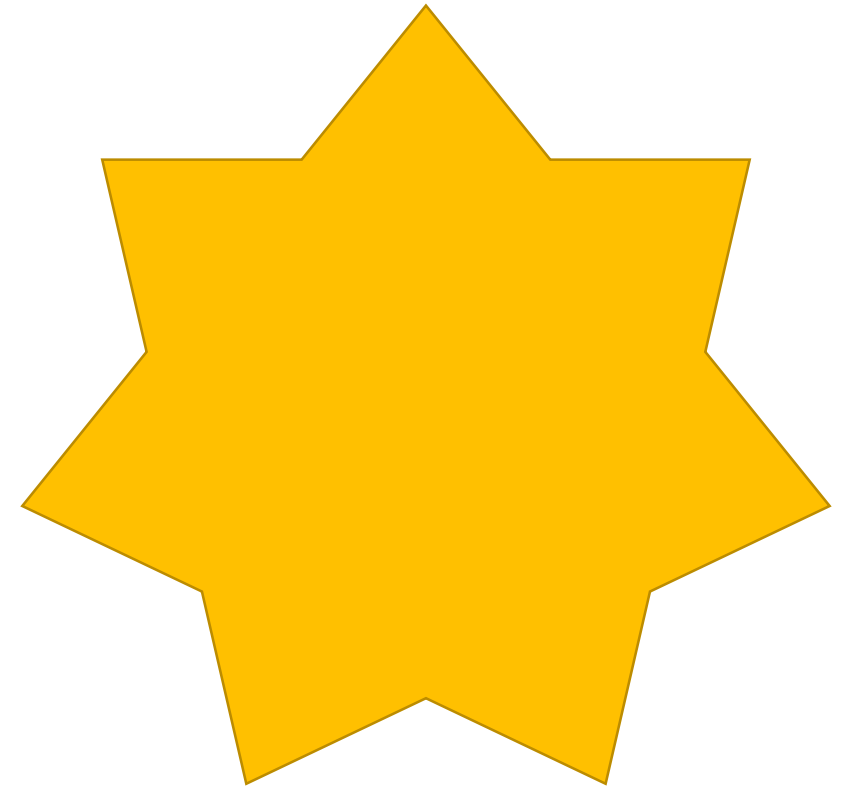


The Runner up.....

Citation excerpt:

“I felt that I received excellent teaching, with the staff going above and beyond their duties and my expectations. The patient-orientated teaching I received has left me with many fond memories and key learning points”

“I felt I was part of the team from the first moment I arrived at the surgery ...the kindness and insight that the entire team showed me will stay with me for the rest of my career”



The Winner.....

Citation excerpt:

“I was challenged and encouraged to develop my clinical skills and knowledge...patients are at the centre of everything we do and are in fact most times the real teacher”

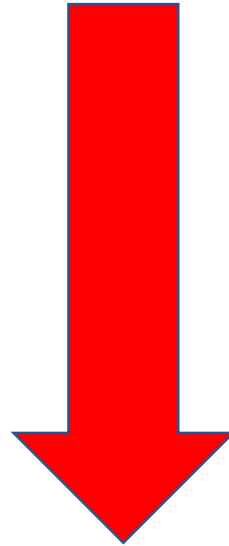
“I was really touched when the GP asked me one Monday morning “How was your weekend?” in comparison to the hospital wards, where it is a bonus if they remember your name. I will remember this when I qualify as a doctor and have the opportunity to teach medical students”

“Completing my GP rotation has definitely encouraged me to give thought to a career in GP and I believe this is a marker of an excellent placement”



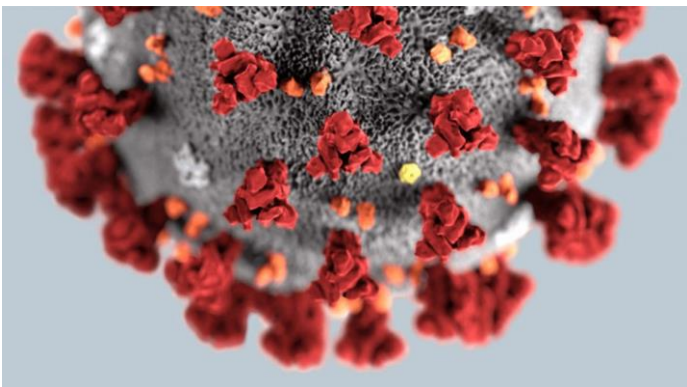
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A quick scan back.....

 **GP 14%**



Jim McMullan



Clinical Teaching Fellow

“GP Perspectives: Focus Groups & Town Hall Meetings”



A stethoscope with a black chest piece and silver tubing is positioned diagonally across the frame. In the upper right corner, a portion of a white computer keyboard is visible, showing keys like 'Z', 'X', 'C', 'V', 'B', 'N', 'M', 'option', and 'command'. The background is a solid, light grey color.

QUB GP

Covid – the New Normal.



Response
from our
Tutors has
been
Humbling



- 16th/17th June GP Tutors from Every Federation Invited
 - The 3 Federation Leads for Sub Deanery Pilot also
 - Updated by our new Prof and Year Leads on current state of play
 - Attended by over 80 GPs
- “ Imagine a 4th Year Student is arriving to your Surgery next week. What experiences can you give /not give them, and what concerns might you have?”

Recurrent Topics

- P.P.E.
- I.T. Wi Fi Accu-rx
- No Patients to see... Didn't last long!
- Social distancing
- Students as "Vectors of Transmission"
- Covid Testing
- Students Coming to their own Surgeries?
- SUMDE Payments

Covid-19 Clinical Attachment Stages Framework

Circulated in Advance of “Focus Group” follow-up meetings
4/5 August

Again Excellent Numbers attended

Goal Posts had moved quite a lot

More Positive noises.....Most Practices a Four!

Huge discussions around Collaborative Working

Cluster Model Mooted

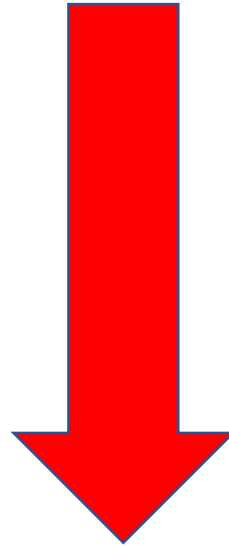
Similar issues as June

September is Upon Us

-
- GMC & MSC says Students must have Clinical Experience
 - They are Key Workers
 - NHS Needs new Doctors every Year
 - No end in sight
 - Once again Primary Care is being asked to lead the way
 - On behalf of my Two Queens Medical Student Daughters a huge THANKYOU!

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Nigel Hart

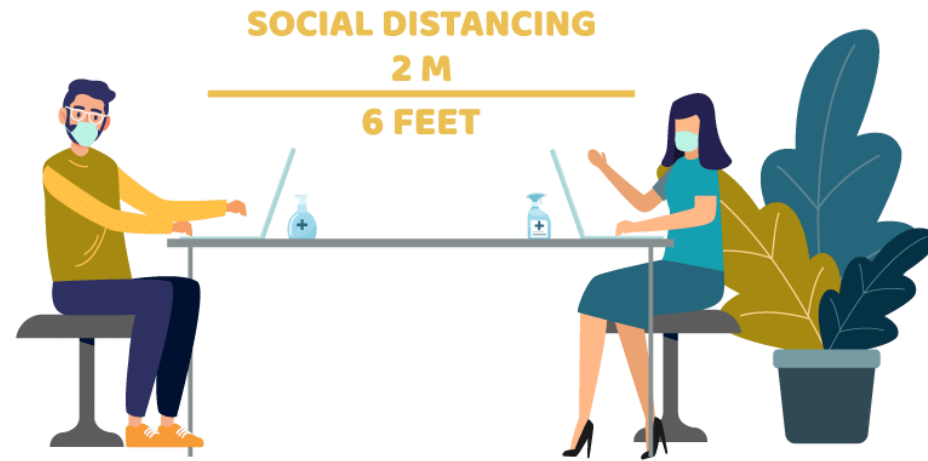


Associate Director for General Practice and Primary Care

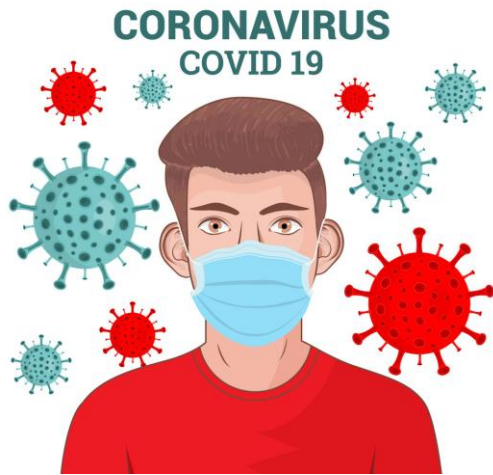
“Horizon scanning: Training Doctors in the time of Covid”



Horizon scanning: Training Doctors in the time of Covid



GP
25%



**THE C25
UNDERGRADUATE
MEDICINE CURRICULUM**

GP
Sub-Deanery



Horizon scanning: Training Doctors in the time of Covid

Training Doctors is a Tri-partite Partnership



Department of Health:
Remit – Workforce

Medical Schools:
Remit – Curricula design and delivery

Clinical Educators (GPs):
Remit – Immerse and Engage Students



Horizon scanning: Training Doctors in the time of Covid

DoH & CMO directed QUB to keep students to one Trust area

Has implications for (minority of) students being placed at home GP Practice

GP Educator good will and good faith trumps all planning & strategizing

Pinch Points – Year 1&2 Family Medicine & Year 5 Post Christmas

Continuing dialogue throughout the year

Huge support from GP Teaching colleagues across UK medical schools – collaboration



Horizon scanning: Training Doctors in the time of Covid

Dept of Health (SUMDE): Return to Clinical Placement Group have granted:

- 12 GP Clinical Facilitators to facilitate Case-Based Discussion (Years 4 & 5)
- Extra Tutor Training Sessions
- Funding to ensure adequate funding for extra PPE (50K Pieces)
- Funding Zoom Licences & Webcams
- Technical Support for Practices
- Vimeo Channel for info. / instructional videos to support GP Tutors
- Travel support for students (still under discussion)



Horizon scanning: Training Doctors in the time of Covid



Horizon scanning: Training Doctors in the time of Covid

Clinical Attachment Stages Framework

QUB Covid-19 Learning Activities Staging Framework - Academic Year 2020-21

Version 1.0 (2nd September 2020)

Year	Module ↓	← Level of patient contact and time student spends in practice →				
		1 Major Lockdown	2 Students not attending surgery	3 Students attending surgery** but no Face to Face patient contact (F2F) *	4 Students attending surgery** but using PPE for F2F	5 "Normal" placement
1	Clinical Skills (groups usually 6-8) 9-11 afternoons	No time in GP practice	GP practice tutor delivers teaching via ZOOM to a group. Students buddy with another student (live) and/or a family member (non-live & pre-recorded with consent) to practise defined clinical skills and receive feedback on skills from the GP. Tutors will also discuss aspects of the skills and may demonstrate some skills where possible.	N/A	N/A	Full course delivered in practice
2	Clinical Skills (groups usually 6-8) 9-11 afternoons					
1	Family Medicine 1 (groups usually 8-9) 5 afternoons	Use of self-directed asynchronous eLearning e.g. Clinically Speaking, Capsule, healthtalk.org Virtual General Practice	Year 1 - GP practice tutors deliver all 5 sessions via Zoom. Students meet family via ZOOM on 2-4 occasions. Year 2 – GP practice tutors deliver all 5 sessions via Zoom, in combination with other members PCT/Patients.	GP practice has students split so only 2 attend at any one time on one occasion during attachment	Students meet family face to face on 1 afternoon session. GP practice has students split so only 2 attend at any one time on one occasion during attachment	Interaction and learning with full range of Primary Care Team F2F home visits/ District nursing / community pharmacy learning opportunities
2	Family medicine 2 (groups usually 8-9) 5 afternoons			Max 2 students meet members of PCT to observe roles in practice	Max 2 Students meet patient with PCT member or GP for 1 afternoon during attachment	
4	GP Specialty (1 or 2 students) 13 days over 3 weeks (See Appendix)	Simulation training Remote teaching by an MDT lead	GP practice tutor delivers some sessions remotely e.g. AccuRx or ZOOM video surgery (student observes). 'Virtual tour' of a practice environment if possible, though students never physically on practice premises.	Student physically attends practice for a minority of the usual 13 days (could be e.g. half days only), with observation, participation and practice-based teaching during this time F2F** within practice with appropriate SD measures.	Student physically attends practice for a majority or all of the usual 13 days, with observation, participation and practice-based teaching during this time F2F** within practice with appropriate SD measures**.	Study guide full requirements completed

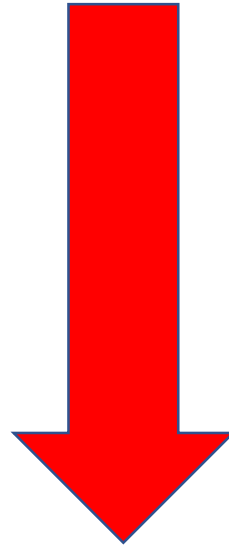
* Some students (for health reasons) may not be > stage 3, even if COVID risk level permitted (i.e. may still attend practice but no F2F** patient contact)

** All F2F** encounters with caveats around appropriate SD – more detail in student and tutor guides



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Eveline Burns



Administrative Lead for General Practice

“Allocations: where we stand and how we will proceed”



Allocations 2020-21

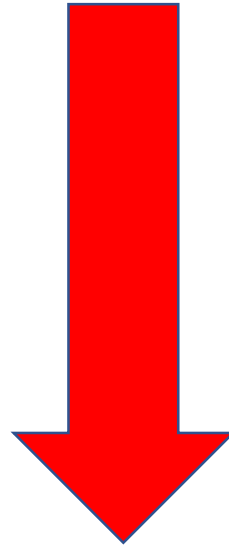
Number of QUB	Year 1	275 (?+)
medical students	Year 2	271
requiring GP	Year 4	286
placements academic	Year 5	271
year 20-21		

Placement type	Duration in practice	Status
Family Medicine year 1	5 afternoons (Tues OR Thurs)	HELP NEEDED
Family Medicine year 2	5 afternoons (Tues OR Thurs)	HELP NEEDED
Year 4	13 days (Oct-May)	Thank you
Year 5	10 days (Oct-Dec)	Thank you
Year 5 (pre-finals)	10 days (Jan-Feb)	HELP NEEDED
Assistantship	4 days (March- May)	Thank you



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Helen Reid



Module Lead for Year 4 GP

“New Online Clinical Resources for GP”

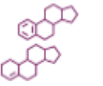



















GPs BEHIND CLOSED DOORS



- Vast resource of authentic GP consultations
- Curated into educational resource as collaborative project across UK med schools
- Facilitated sessions to maximise learning



MEDICINE	SPECIALTIES	SURGERY	THERAPEUTICS		
 ENDOCRINE (MEDICINE)	 GASTROINTESTINAL (MEDICINE)	 HAEMATOLOGY (MEDICINE)	 INFECTION (MEDICINE)	 NEUROLOGY (MEDICINE)	 ONCOLOGY (MEDICINE)
 RHEUMATOLOGY / MSK (MEDICINE)	 CLINICAL INVESTIGATION	 ELDERLY CARE	 EMERGENCY MEDICINE	 ETHICS AND PROFESSIONAL STUDIES	 GENERAL PRACTICE
 PALLIATIVE AND END OF LIFE CARE	 PSYCHIATRY	 PUBLIC HEALTH MEDICINE	 SEXUAL HEALTH	 CARDIOVASCULAR (SURGERY)	 ENDOCRINE (SURGERY)

Search

Search results: GP



Cushing's disease 4

Endocrinology

The woman whose friends noticed an unusual pattern of weight gain

weight gain

proximal myopathy

bruising

endocrinology

cushing's disease



Oesophageal cancer

Gastroenterology

The man who thought he had bad indigestion

chest pain

dysphagia

- 40 extended GP cases with quizzes and feedback, further reading
- Various lengths, great level for yr 4/5
- Topic summary on website/tutor guide

- Hundreds of patient video clips with linked resources
- Organised by body system; definite 2ry care slant
- Curated virtual surgeries; potential discussions

Louise Sands (Clinical Teaching Fellow) & Miriam Dolan (GP Sub-Deanery Pilot Western Fed. Co-Lead)



“Practically Speaking”



Horizon scanning: Training Doctors in the time of Covid

Clinical Attachment Stages Framework

QUB Covid-19 Learning Activities Staging Framework - Academic Year 2020-21

Version 1.0 (2nd September 2020)

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	Clinical Skills (groups usually 6-8) 9-11 afternoons	All synchronous teaching remote via ZOOM or MS Teams QUB staff facilitating all synchronous virtual teaching				
1	Family Medicine 1 (groups usually 8-9) 5 afternoons	Use of self-directed asynchronous eLearning e.g. Clinically Speaking, Capsule, healthtalk.org Virtual General Practice	Year 1 - GP practice tutors deliver all 5 sessions via Zoom. Students meet family via ZOOM on 2-4 occasions.	GP practice has students split so only 2 attend at any one time on one occasion during attachment	Students meet family face to face on 1 afternoon session. GP practice has students split so only 2 attend at any one time on one occasion during attachment	Interaction and learning with full range of Primary Care Team F2F home visits/ District nursing / community pharmacy learning opportunities
2	Family medicine 2 (groups usually 8-9) 5 afternoons		Year 2 – GP practice tutors deliver all 5 sessions via Zoom, in combination with other members PCT/Patients.	Max 2 students meet members of PCT to observe roles in practice	Max 2 Students meet patient with PCT member or GP for 1 afternoon during attachment	
4	GP Specialty (1 or 2 students) 13 days over 3 weeks (See Appendix)	Simulation training Remote teaching by an MDT lead	GP practice tutor delivers some sessions remotely e.g. AccuRx or ZOOM video surgery (student observes). 'Virtual tour' of a practice environment if possible, though students never physically on practice premises.	Student physically attends practice for a minority of the usual 13 days (could be e.g. half days only), with observation, participation and practice-based teaching during this time F2F** within practice with appropriate SD measures.	Student physically attends practice for a majority or all of the usual 13 days, with observation, participation and practice-based teaching during this time F2F** within practice with appropriate SD measures**.	Study guide full requirements completed

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** All F2F** encounters with caveats around appropriate SD – more detail in student and tutor guides



Horizon scanning: Training Doctors in the time of Covid

Clinical Attachment Stages Framework

QUB Covid-19 Learning Activities Staging Framework - Academic Year 2020-21

Version 1.0 (2nd September 2020)

Year	Module ↓	← Level of patient contact and time student spends in practice →				
		1	2	3	4	5
	Staging Level →	Major Lockdown	Students not attending surgery	Students attending surgery** but no Face to Face (F2F) *	Students attending surgery** but using PPE for F2F	“Normal” placement
4	GP CCTV (2-3 students) 1 session	No CCTV Sessions	Student takes history remotely using accuRx or ZOOM with tutor observing and giving remote feedback	Student takes history remotely using accuRx or ZOOM with tutor observing and giving remote feedback	Student takes history remotely using accuRx or ZOOM with tutor observing and giving remote feedback	Student takes history remotely using accuRx or ZOOM with tutor observing and giving remote feedback
5	GP Placement (2 students) 2 weeks	No time in GP practice All teaching remote via ZOOM tutorials	Student takes history remotely using accuRx or ZOOM with tutor observing and giving remote feedback	GP practice has student present 2-4 days/week Telephone/video consulting (joint surgery)	GP practice has student present for 4-5 days/week Some video and telephone consultations (joint/parallel) See 1-2 patients F2F** with consent Home Visit (if possible)	Full course delivered in practice Direct patient contact Face to Face tutorials in practice
5	GP Placement (CCP) (2 students) 2 weeks	No GP tutors used outside of QUB staff Use of self-directed elearning e.g.	Student takes history remotely using accuRx or ZOOM with tutor observing and giving remote feedback	GP practice has student present 2-4 days/week Telephone/video consulting (joint surgery)	GP practice has student present for 4-5 days/week Some video and telephone consultations (joint/parallel) See 2-4 patients F2F** with consent Home Visit (if possible)	Interaction and learning with Primary Care team e.g. visits Study guide full requirements completed
5	GP assistantship (1 student) 1 week	Speaking Clinically, Capsule, healthtalk.org Simulation training Remote teaching by a MDT lead	Student takes history remotely using accuRx or ZOOM with tutor observing and giving remote feedback	GP practice has student present 4 days Telephone/video consulting (joint surgery) Complete project	GP practice has student present 4 days Some video and telephone consultations (joint/parallel) See 2-4 patients F2F** with consent Home Visit (if possible) Complete audit	

* Some students (for health reasons) may not be > stage 3, even if COVID risk level permitted (i.e. may still attend practice but no F2F** patient contact)

** All F2F** encounters with caveats around appropriate SD – more detail in student and tutor guides





**Helen
Reid**



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Kearney**



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Wilson**



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McMullan**

Clinical Attachments Sweep



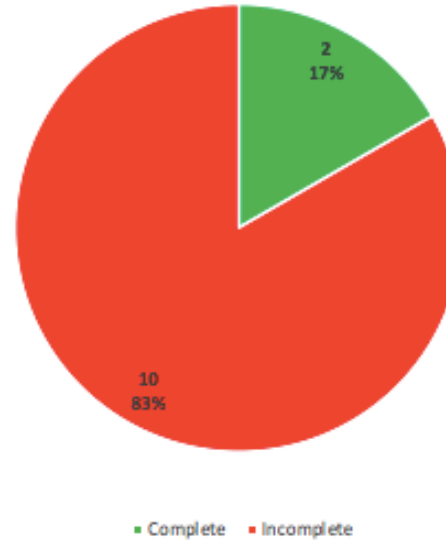
Year 4 and 5 (inc 'catch-up' block)

MY DASHBOARD - GENERAL PRACTICE

QUICK LINKS

Ref	Task	Status
1	Student Declaration	Incomplete
2	Learning Needs Assessment	Complete
3	Practice Attachment Timetable	Incomplete
4	Student Teaching Activity (STAT)	Incomplete
5	Experience with Primary Healthcare Team	Incomplete
6	Mini-CEX 1	Incomplete
7	Mini-CEX 2	Complete
8	Case Based Discussion	Incomplete
9	GP Tutor's Evaluation of Student Performance	Incomplete
10	Student's Evaluation of Attachment	Incomplete
11	CCTV Video Feedback Analysis	Incomplete
12	Module Assessment	Incomplete

My Dashboard



Using Your E-Logbook

Learning Outcomes

Task 1 - Student Declaration

Task 2 - Learning Needs Assessment

Task 3 - Practice Attachment Timetable

Task 4 - Student Teaching Activity STAT

Task 5 - Experience with Primary Healthcare Team

Task 6 - Mini CEX 1

Task 7 - Mini CEX 2

Task 8 - Case Based Discussion

Task 9 - GP Tutor's Evaluation of Student Performance

Task 10 - Student's Evaluation of Attachment

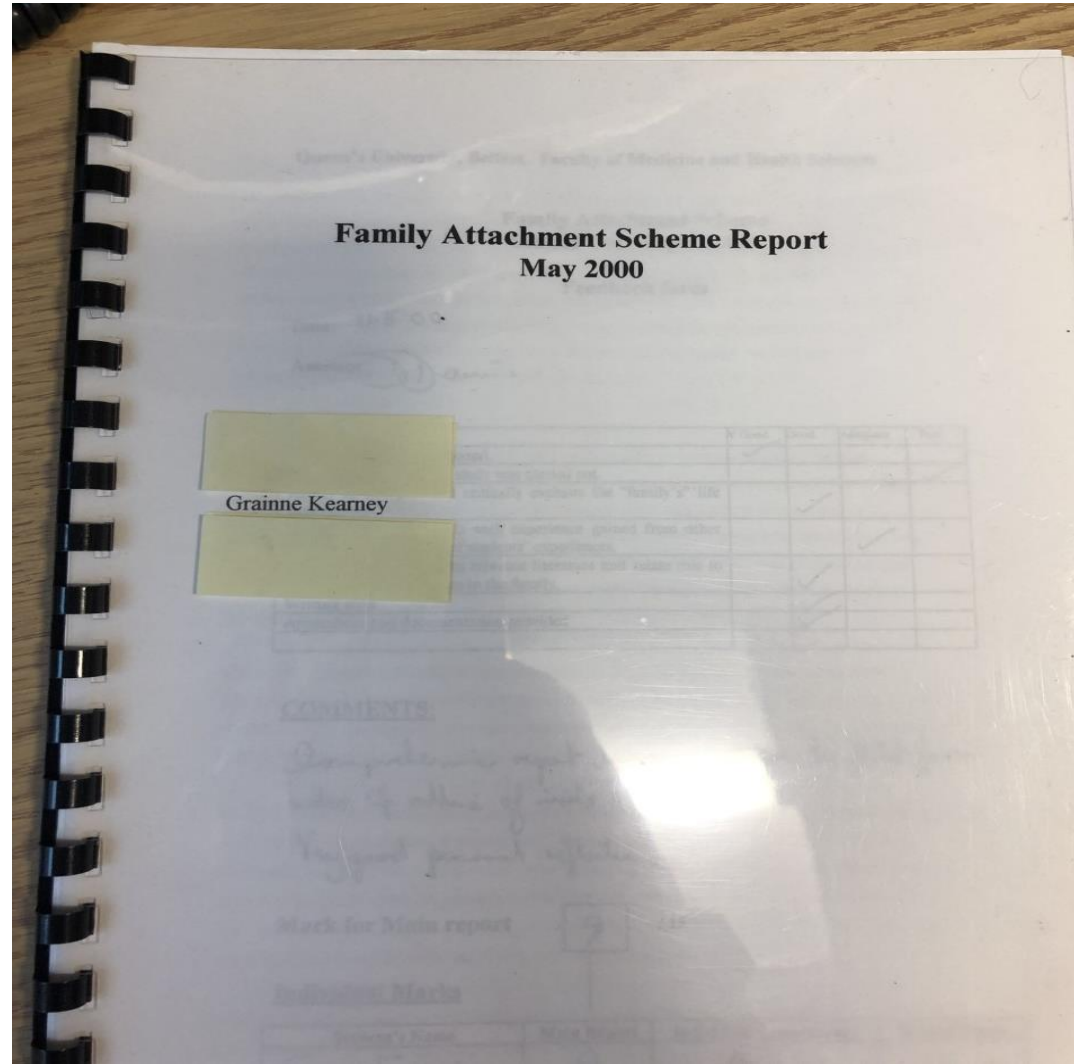
Task 11 - CCTV Video Feedback Analysis

Task 12 - Module Assessment

- Paperfree: student e-logbooks across all placements, electronic feedback forms
- Year 4: initial Dunluce 'teaching week' 2 days QUB virtual induction, further online material, Weds PMs facilitated sessions
- Catch up block (7 Sept start): variable baseline experience as entering yr 5, no logbook requirements, CBD prep, foundational for 2 x 2 week year 5 attachments and GP assistantship



Family Medicine – Grainne Kearney



CLINICAL SKILLS ATTACHMENT- YEAR 2

What is unchanged?

Experienced Teachers – Thank you!

Familiar Resources – Website, Teachers Guidelines, Role plays, QRG, DOCS

Small groups students - remains 6-7 - previous “tutorial” groups

Importance of keeping an accurate attendance register

Weekly timetable

CSEC sessions f2f (less skills – DRE/glucometer/insulin/eyes/ears)

Student and Teacher enthusiasm and the clinical skills!



CLINICAL SKILLS ATTACHMENT- YEAR 2

What is different?

Remote teaching by ZOOM only – basic Zoom training blog available

Clinical skills – mixture of ‘usual’ autumn skills with some spring 2nd year skills

GI / Diabetes / Neurology

MSK / Gynae / Thyroid

9 weekly sessions to be timetabled - but allows 3 weeks wriggle room to change dates in emergencies

NO REAL patients so.....

Role plays expanded, Detailed DOCS, your patient stories.....



CLINICAL SKILLS ATTACHMENT

Feedback remains essential to clinical skills teaching!

How?.....

Histories – Live student role plays – consider break out rooms (another blog)

Examinations – Live demos may be possible – Likely dependent on video recordings of students performing skills on volunteers

Video recording guidance available – Consent forms, Student Checklist

Onus is on the student - just “share screen” with the group

Requires flexibility depending on individual circumstances / groups

No expectation of DOCS but students need to upload their video checklists in to their e-portfolio

Set ‘homework’ task weekly prior preparation by students will be essential - Suggestions on the timetable eg. reviewing webpages /1 or 2 students preparing a video



What is the future?

Remote consulting / Remote care

Opportunity during the remote teaching to consider changes to all of our clinical practice



CCTV – The Past



CCTV – The Present (& Future?)

CCTV GP Training Zoom Meeting (27 practices)

Friday 25th September 2020 at 1pm

Week 1 of Year 4 GP Attachment

Friday afternoon

Mock timetable

2:00pm	Introduction with students
2:30pm	Patient 1
2:50pm	Patient 2
3:10pm	Patient 3
3:30-4pm	Discussion, Reflection and Feedback



ECHO (Extension for Community Healthcare Outcomes)



ECHO

Concept of ECHO

Nurturing of case based discussions

Feedback

Collaborative working with Primary and Secondary Care

Allocation:

- Week 3 of Year 4 GP Attachment

- Wednesday afternoon

- Run 3 ECHOs concurrently

- Each ECHO session has 2 GP Facilitators and 1 Speciality Doctor

- Engaging 18 difference disciplines

- All sessions recorded to allow students to see all ECHO sessions



Prof. Louise Dubras



**Foundation Dean
Ulster University
School of Medicine
Graduate Entry Medical Programme 2021**





School of Medicine

**Graduate Entry Medicine: Prof Louise
Dubras**

2nd September 2020

School of Medicine

Vision

A nationally and internationally excellent medical school recruiting high quality entrants.

Produce graduates whose vision is community focused yet globally ambitious; academically capable change agents.

Produce doctors able to deliver whole person care with skill and compassion, as members and leaders of diverse clinical teams; in partnership with patients and clients.



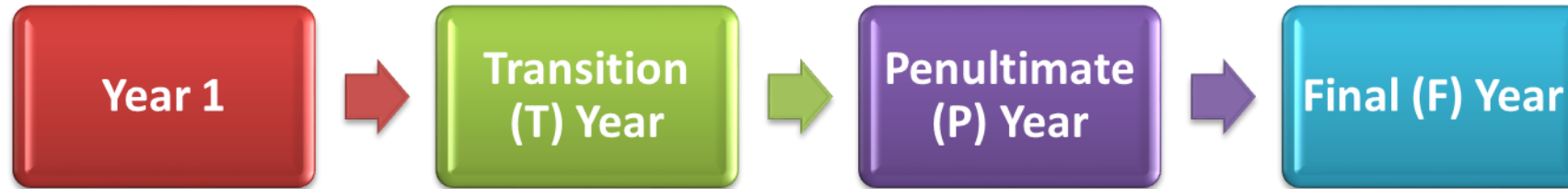
Graduate Entry Medicine

Entry Requirements

- 2:1 Hons Degree in any subject
- Satisfactory score in the GAMSAT
- Pass MMI selection



Overview of course structure



In Year 1, emphasis on lectures, tutorials and group activity with short primary care placements

In Year 2, 5 week blocks of medicine, surgery and GP, rotated with traditional lectures, tutorials and group activity

In Year 3 and Year 4, clinical attachments take precedence with complementary lectures running in parallel. In final year, all students undertake an elective.

Overview of course structure

Year 1	<table border="1"> <tr> <td>3</td> <td>5</td> <td>6</td> <td>5</td> <td>5</td> <td>6</td> <td>5</td> <td rowspan="4" style="text-align: right; vertical-align: middle;">35 weeks</td> </tr> <tr> <td>Foundations of clinical science</td> <td>Life Support</td> <td>Life Maintenance</td> <td>Life Protection</td> <td>Life Cycle</td> <td>Life Control</td> <td>Life Structure</td> </tr> <tr> <td colspan="7" style="text-align: center;">Basic and Clinical sciences</td> </tr> <tr> <td colspan="7" style="text-align: center;">Patient and Doctor Community and Population Health Personal and Professional Development</td> </tr> </table>							3	5	6	5	5	6	5	35 weeks	Foundations of clinical science	Life Support	Life Maintenance	Life Protection	Life Cycle	Life Control	Life Structure	Basic and Clinical sciences							Patient and Doctor Community and Population Health Personal and Professional Development																												
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Overview of course structure

Typical learning week (Year 1)



Monday	Tuesday	Wednesday	Thursday	Friday
PBL Tutorials (based around a patient case)	Lectures (related to current patient case)	Community visits/ GP/ personal and professional development (related to current patient case)	PBL Tutorials	Anatomy (related to current patient case) Expert Forum
Independent learning	Patient and doctor clinical and communication skills		Independent learning	Independent learning



Thank you

Claire Loughrey



GP Sub-Dean
The Federation Support Unit
GP Sub-Deanery Pilot

Davina Carr



GP Lead
GP Sub-Deanery Pilot
North Belfast Federation



FSU GP Sub-Deanery

North Belfast Federation
South West Federation

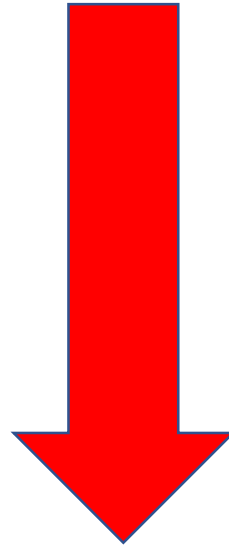


Q & A



For Attendance (& SUMDE Payment)

Please put your Name and Practice Code in the chat below



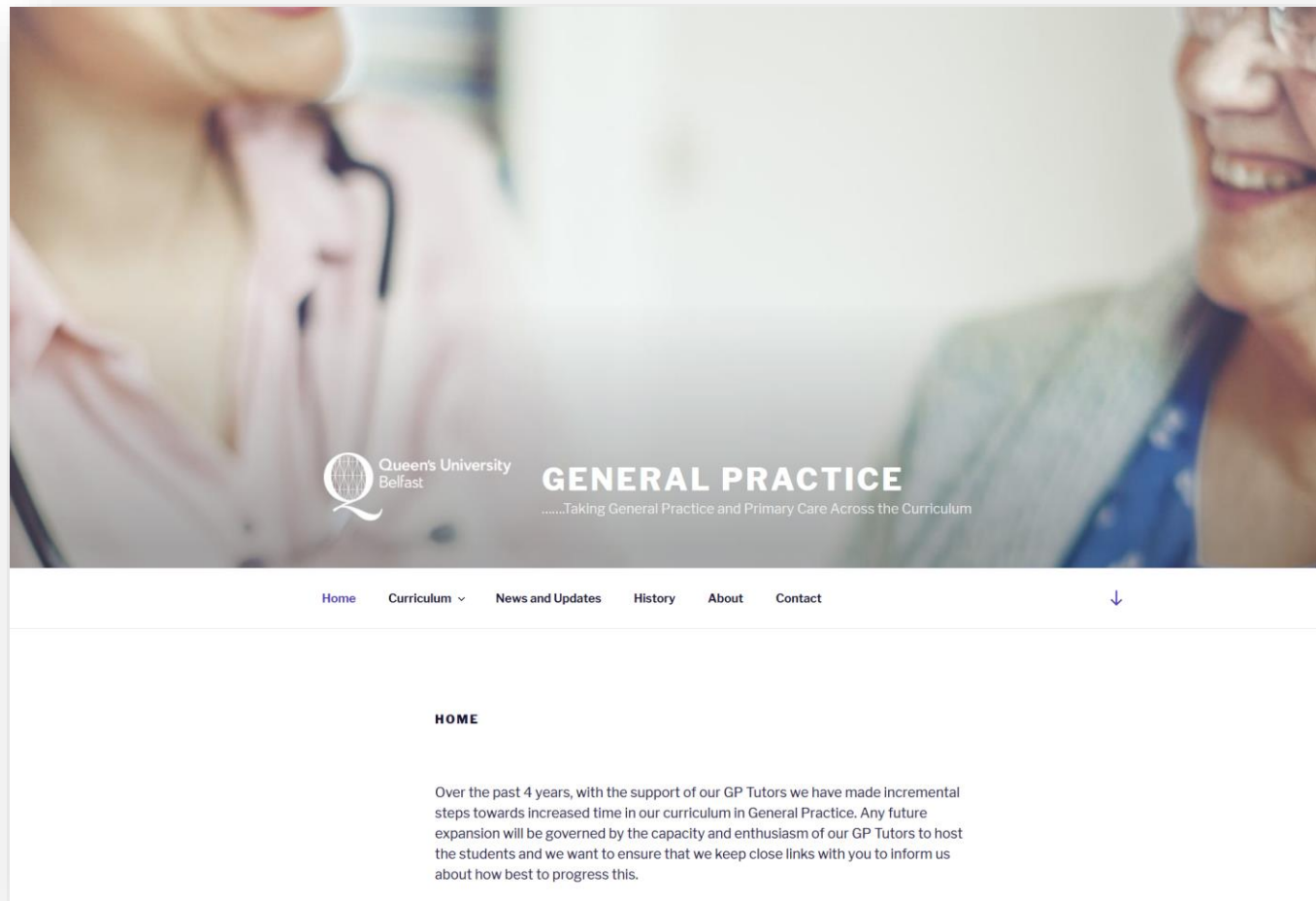
Dr Jenny Johnston



**Reader in General Practice Education
Centre for Medical Education
Queen's University Belfast**

“Closing remarks”





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“The greatest thing in this world is not so much where we stand as in what direction we are moving.”

Johann Wolfgang von Goethe

