

**Faculty Education Office (Medicine)**

**Year 6 Senior Medicine and Surgery Firms**

**Foundation level experience in managing patients, teamworking and understanding healthcare systems in primary and secondary care**

**User Centred Care:**

**As a result of these modules the undergraduate should be able to:**

Describe and assess the interplay of physical, social and psychological factors in the presentation and management of illness, whether in hospital, polyclinic or General Practice.

Assess the impact of family/personal relationships on the presentation, course and management of disease.

**Understanding the System in which you will work**

**As a result of these modules the undergraduate should be able to:**

Explain the impact of local demography on disease prevalence, patient’s use of services, the health care workload, and the primary or secondary health care team structure.

\*Explain the doctors joint responsibilities to both the individual patient and to society as a whole and describe possible tensions between these roles

\*Recognise a doctor’s professional obligations to patients, society and self, paying particular attention to their impact on clinical governance

Evaluate strategies to offset the various stressors encountered in the day to day work of a doctor

**Long term disease management & EBM**

**As a result of these modules the undergraduate should be able to:**

Describe and apply up to date evidence based guidelines in the management of common long term medical conditions, (e.g. Coronary heart disease, Diabetes, Hypertension, Asthma, COPD, Depression, Atrial fibrillation ) ,including both pharmacological and non pharmacological interventions

Describe the division of responsibilities for chronic disease management within the health care team as a whole (in the community or in hospital).

**Acute disease management and EBM**

Observe and where possible partake in the management of patients with acute common medical and surgical conditions (eg acute asthma, exacerbation of COPD, acute coronary events, stroke, GI haemorrhage, trauma, the acute abdomen and demonstrate your understanding of evidence based guidelines in their management

**Consultation skills**

**As a result of these modules the undergraduate should be able to:**

Perform a number of consultations (from start to finish) under supervision in general practice and in hospital or polyclinic, applying a patient centred approach which respects the patient’s right to be involved in decisions about their care.

Demonstrate an ability to take a focused history, assess and manage a variety of patients in a variety of clinical settings (including Out Patient Clinic, Emergency Department, GP surgery and home visits) using appropriate language and communication skills to seek patients understanding and engagement

Demonstrate skills in listening, the use of open, closed, reflective questions and summarising to achieve a shared understanding and partnership with patients when consulting.

Clearly explain your examination findings, the working diagnosis and management plan to the patient

Clearly explain any medication prescribed for patients (how to take it and what it is for)

Demonstrate an understanding of the impact of psychosocial, cultural, behavioural and familial factors in the presentation of, and choices made by, patients in health care

Describe the terms “doctor’s agenda and patient’s agenda”. Outline possible tensions between these two and explain how these might be overcome.

**Clinical skills**

**As a result of these modules the undergraduate should be able to:**

Confidently perform a clinical examination appropriate to the clinical presentation

Recognise the acutely unwell patient and commence initial management

Distinguish between benign self limiting illness and potentially more serious presentations

Select appropriate investigations for diagnosis and management and show an awareness of their indications and limitations

Demonstrate competence at performing the clinical procedures listed in the year 6 guide

Demonstrate the use of scoring tools to evaluate patients (e.g. PHQ9, cardiovascular 10yr risk assessments

**Teams and team working**

**As a result of these modules the undergraduate should be able to:**

List the members of the primary and secondary health-care team, describing their training, roles, responsibilities (including GP, practice nurse, district nurse, Health Visitor, Social worker, Practice manager, Health Care assistants, Ward Nurses, Specialist nurses, Physiotherapists and OTs)

Describe the constituent elements of good team work and critique the effectiveness of teamwork in your attachment (not sure how this is going to happen practically)

Attend and contribute to a PHCT meeting and an MDT meeting

Evaluate the effectiveness of communication between primary and secondary care,

Explain obstructions to more effective communication between primary and secondary care and outline strategies to overcome these.

**Health Promotion and Screening**

**As a result of these modules the undergraduate should be able to:**

Describe the impact of culture, diet and lifestyle on the health of the local population

List the various national and local health promotion and screening programmes

Define the difference between screening and case finding

Explain the “inverse care law”

**Audit and clinical governance**

**As a result of these modules the undergraduate should be able to:**

Define the term “clinical governance”

Describe briefly the agencies involved in the setting, monitoring and evaluation of standards in the NHS.

Describe the audit cycle process and how audit differs from research

Define what is meant by audit criterion and audit standard

Design, perform and write up an audit on an aspect of the Primary Health Care Teams work, demonstrating an understanding of the process and its contribution towards clinical governance

Evaluate the audit’s findings, making appropriate proposals for systematic improvements (if necessary)

**Prescribing**

**As a result of these modules the undergraduate should be able to:**

Demonstrate a familiarity with each of the major drug groups in the BNF

Apply this knowledge when consulting by being able to prescribe (under supervision) at least one drug at the correct dose from the following groups: antibiotics, antihypertensives (ACE, calcium channel anatagonist, B blocker, Alpha blocker, thiazides) NSAIDS, SSRI antidepressants, analgesics, oral diabetes medication.

**Supervision**

You should **never be in a position where you are asked to work beyond your competence** or outside the structured supervision required for pre-qualification students. All staff on the team should be aware of these limitations on students work.

To protect yourself and your patients

Make patients and staff aware you are a medical student.

* Identify yourself as a Medical Student
* Wear your official name badge which identifies you as a Medical Student
* Correct anyone who calls you doctor.

Ensure your supervisor (or if unavailable another qualified clinician) countersigns anything official that you have written to show they agree and have taken overall responsibility for it.

* Entries in patient records must be signed and dated and your name and status as “medical student” legibly printed.
* Pathology and other request forms may be written, but not signed by you and agreed and signed by the doctor supervising you. You may be permitted to sign some pathology forms yourself depending on local trust rules.
* You are not permitted to write prescriptions except as a learning exercise directly supervised by your clinical supervisor. You may never sign a prescription (it is an offence under the medicines act)

It is School Policy that all students maintain membership of a medical defence organisation (e.g. MDU or MPS). This is free to students and will give you legal assistance and professional insurance in the (very unlikely) event of any claim being made against you.

Always question anything you are uncertain about and do not do anything you are uncertain about even if you are worried it may make you look foolish. You should normally clarify issues with your supervisor or consultant but if you remain concerned go to the DCS, Year Head, or your Clinical Tutor.