Welcome to the second edition of the Leicester Medical School Clinical Teachers’ Newsletter. We hope you find it an interesting read and a useful update on news and activities in and around the Medical School.

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The Medical School would like to wish all our clinical teachers a Happy Christmas and a prosperous New Year!

Tribute to
Dr Adrian Hastings

All of us at the Medical School are saddened and shocked by the sudden and unexpected death of our colleague Adrian Hastings. Adrian was a highly respected GP and Medical Educator, and he was the mainstay of education in General Practice at the Medical School for many years, so he will be sorely missed by colleagues and students alike.

His contribution to medical education has been huge, and generations of students have reason to be grateful both for his stimulating teaching, and his major contributions to the design of the medical course. His passion for medical education was clear for all to see. Colleagues will also remember him for his generous support and mentoring. Many who are now senior educators were helped along their way by Adrian’s gentle and insightful guidance. Adrian led the ‘Clinical Method’ block for many years, and will be very well known to clinical teachers across our patch. We are sure that you will be as shocked and saddened as we are and join with us in sending sincere condolences to Adrian’s family and friends at this difficult time.

Adrian was a doctor with a strong set of values which he reflected in all aspects of his work. He trained initially at Birmingham, but after postgraduate training he spent some time in Mozambique, helping to rebuild medical services in a country ravaged by years of war. He returned to the UK to work as a GP in one of the most deprived parts of Leicester, and throughout his career he championed the provision of high quality medical care for needy communities. He never lost his interest in Africa however, and continued to work through charities such as ‘Skillshare’ to support developments there. Just a few days before his death he was elected to Fellowship of the Royal College of General Practitioners in recognition of his huge achievements.

He joined the Medical School at Leicester in 1991, in the then Department of General Practice, where he rapidly became a key player in a group of enthusiastic medical educators pushing the boundaries of the subject. His approach to medical education was always highly professional, supported by extensive scholarship and his own research in consultation skills teaching and assessment. He has made a lasting contribution to the literature through a number of important publications.

Adrian joined the Department of Medical & Social Care Education in 2003, and became a key member of the team which has developed the Medical School at Leicester to the prominence it enjoys today.

We will all miss Adrian so much, but his lasting legacy is there for all to see as a fitting memorial to a valued colleague and friend. May he rest in peace.

Professor Petersen
Assessment Update

Key Changes to the Phase 2 Exams (Penultimate Year and Final Exams)

There have been a number of changes to the format of the assessments for medical undergraduates in Leicester over the last year. These changes have in part been driven by the need to be able to demonstrate to outside parties including the GMC, that the assessment of medical students in Leicester is a valid and reliable process.

The Assessment Programme at Leicester has always been competency based and integrated, with each assessment building on previous learning, and that will remain the case. However the new changes will allow greater demonstration of validity and reliability whilst retaining a high level of fidelity.

What’s New?

Introduction of a Single Best Answer (SBA) MCQ paper as a component of each year’s written examination. Each examination will continue to have one short answer question (SAQ) written paper.

Change to the marking of OSCE examinations. Global rating scales and checklists will replace the Leicester Assessment Package (LAP). This will allow for more robust standard setting. From 2014 the IPE and FPE OSCEs will use the borderline group regression (BGR) method to standard set which will improve reliability, discrimination and defensibility.

How can you Help?

Single best answer questions:

We currently do not have a bank of questions and need 400 usable questions to run the IPE (penultimate year) and FPE (finals) examinations. This is a huge task. We have been running question writing groups and editing sessions but need lots more questions. All attendance and submissions are logged and certificated for appraisal purposes.

If you are interested in contributing to question writing even if you feel you are not trained, we would welcome you with open arms! Please email Rachel Westacott (rjw25@le.ac.uk) for further information.

Being an Examiner for the OSCE Examinations

The change in marking format means that all examiners will need to undergo new examiner training. We really appreciate the commitment to examining that has been shown by many over the last few years. We will aim to run concise examiner trainer sessions across all sites with the aim to keep the sessions to a 90 minute maximum timescale. Refreshments will also be provided!

If you have not examined before but would like to be involved, please let Jonny Acheson (ja202@le.ac.uk) or Rachel Westacott (rjw25@le.ac.uk) know.

Examiner training dates have now been circulated. Again these will be certified as will total hours spent examining for appraisal purposes.

By Dr John Dormer and Dr Rachel Westacott

An overview of the new assessment process across the 5-year Curriculum is presented below.

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The Medical School Bids Farewell to Dr Gary Aram at the Annual GP Conference

Conference attendee, Dr Shiraz Makda, shares a few words about his ex-tutor, Dr Aram.

“As a newly qualified GP and having trained locally, it gives me great honour to thank Dr Aram for his words of wisdom all those years ago when he was my tutor on the Clinical Methods Course. His enthusiasm for teaching and close relationship with the medical school is something that many of us Leicester graduates hope to continue.”

Best of luck
Shiraz

Guidance for Clinical Teachers

The Top Ten Tips

We would like to provide some advice for our clinic tutor colleagues

1. Know the Student(s): please appreciate the stage of training your students have reached. Some tutors, in the course of a week, may take different classes and it is important not to assume that all students are in their final year! The student clinical programmes start in March, so at this time of year, the students will be less experienced than those you have taught in February.

2. Best Rated Teaching: Students seek good role models and tutors who are engaging. They enjoy opportunities to ‘get involved’ and appreciate when tutors watch them take a history and examine patients or listen to (and interrogate) their presentations.

3. Providing Feedback: Students crave feedback on their performance whether it is at a summative exam or ad hoc teaching opportunity. It is increasingly useful to provide written feedback if possible.

4. Awarding Excellence: Most students are very good, some excel. Please let us know about students who excel in a particular discipline or who have undertaken extra-curricular activities with you / team.

5. Student Support: The University has a dedicated Pastoral Support Unit that students can be directed to if they are under-performing because of health or domestic reasons. Financial support for students is also available if the need arises through the Student Welfare office.

When necessary, students are referred to the UHL occupational health service.

6. Student Professionalism and Attendance: The University expects a very high standard of behaviour from our students: the same as we expect from qualified staff. If you have concerns then please report these either directly to us or through the Education Leads. Attendance is also critical as we expect clinical students to work as apprentices: do not hesitate to flag up poor attendance. The medical school holds monthly meetings reviewing the progress of students who have concerns raised about their behaviour.

7. Lectures: These are useful for delivering core teaching knowledge to a large group of students. If you wish to make lectures or other teaching sessions more interactive then consider using turning point (turningtechnologies.co.uk).

8. Sensitive Issue: Dealings with students should be on a friendly and professionalism basis. Be aware of how certain forms of behaviour may be viewed and do not leave yourself open to accusations of being overly harsh or overly familiar with students.

9. Support for you: The Undergraduate Co-ordinators and Education Leads are a good source of information, but you are always welcome to contact us directly.

10. Student Feedback: The University collates and reports student feedback to the Education Leads: please speak with your education block lead if you would like to receive feedback specific to your teaching, for example to adapt your own teaching or provide evidence for your appraisal.

By Dr Adrian Stanley

Visit of Dr Simon Kitto, Assistant Professor, Department of Surgery, University of Toronto

Dr Simon Kitto, a sociologist analysing team-working in the clinical area of surgery in Toronto Canada, joined academics and practice-teachers from the University of Leicester, De Montfort University and Leicestershire Partnership Trust to support a faculty development away day on interprofessional education (IPE).

Over 73 people attended a series of days held before the start of the academic year to consider aspects of teaching and learning relating to the early introduction of IPE within any health or social care curriculum. Discussions focused on the historical divisions of the healthcare workforce and the emerging new team-based solutions for today’s complex and stretched care services.

By Professor Liz Anderson
MEDICAL SCHOOL NEWS BITES

First Year Medical Students Receive iPad for Teaching

This year has seen quite a leap in terms of the Medical School’s adoption of technology into its teaching practices. All of our new first year students were given an iPad during induction week (much to their delight) instead of workbooks. Using a variety of ‘apps’ the students are able to take notes and complete their group work using the iPad as the recording device. Initial feedback suggests this has been received very well.

Our hope for the future is that not only will we be able to significantly reduce the amount of paper we utilise in our teaching, but that introducing devices like the iPad will positively impact on the learning experience at Leicester. We hope that we can make once static documents (our workbooks) much more interactive with the addition of hyperlinks and embedded videos and quizzes. Exciting times!

By Dr Mark Hamilton

Dr Richard Wright Receives Honoured Teacher Award

The Honoured Teacher Award for 2013 was presented to Dr Richard Wright during the First Year Induction week in September. The Honoured Teacher Award marks the significant contribution that individual NHS staff make to the teaching and development of our students into doctors. The award will be given on an annual basis and this is the first time the Medical School has made such an award.

Richard Wright was honoured because of his work in developing the Acute Care Block for the senior students so that it gives the fundamental skills and knowledge they need to become safe and competent doctors. When the block was first introduced nearly 7 years ago, Richard insisted the students work a full shift pattern and made to feel active members of the team. In addition Richard innovated with new technology making the block paperless and including many forward thinking learning tools, from blogs to texts to smart phone technology.

Dr Heney commented that “The Medical School values the contribution made by the many NHS staff. We will be introducing further awards in the New Year to reflect the importance of this partnership in training the doctors of the future.”

Leicester Medical Students to be taught how to hold consultations on-line with ‘virtual patients’

University of Leicester’s Medical School is putting online consultation at the heart of its teaching curriculum for first year medical students — a first for any university in the UK.

From early October, the University’s Department of Medical Education will be teaching all its first year students how to hold online consultations using Patients Know Best, the world’s first fully patient-controlled online medical records system. 176 medical students will be taught how to hold consultations online with ‘virtual patients’ — ordinary people who will simulate live consultation scenarios with the students.

Dr. Ron Hsu, Innovation Lead and Senior Teaching Fellow at the Medical School said: “We see that technologies, such as Patients Know Best, that enable online consultation with patients are going to play an ever increasing role in the careers of doctors. GPs and specialists alike are going to need to know how to communicate and interact with patients using these technologies. Our hope is that by putting online consultation early in our undergraduate teaching, we will not only prepare our students for the future but help them improve the level of care they provide patients.”

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