



QUEEN'S UNIVERSITY BELFAST

Year 4 General Practice Module MED4014
Tutor guide 2020-21



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Introduction

Dear colleague,

Thank you for hosting QUB medical students on their Year 4 General Practice attachment. While we appreciate your support every year, we particularly welcome it for the academic year 20/21 amidst the pandemic turbulence which has transformed so many aspects of our lives, both professional and personal. Team GP at QUB are extremely grateful that you are continuing to take our medical students in such difficult conditions.

We don't expect that students get the same experience as they did in the past and we welcome your comments on what you have learned during this year. We will learn together a new model for delivery of safe and effective workplace-based learning for our students and we encourage that you share your experiences with us throughout the year.

The main purpose of the Year 4 GP attachment remains enabling students to develop clinical skills, attitudes and behaviours fundamental to the competent and compassionate delivery of clinical care in General Practice. Students consistently rate this course highly and value the unique opportunities; in many cases it has also been a stimulus for choosing a career in General Practice.

The student usually 'sits in' (in person with appropriate PPE or virtually) with GP team members initially, ideally progressing through the attachment to 'hot-seating' or more independent consulting with presentation of each patient. Practices are of course welcome to use a mixture of face to face, telephone and video consultations; we appreciate practices have different resources and access. We would be hopeful that where safe and appropriate students still get to experience as much face to face time in practices and with patients as possible; year 4 medical students are considered 'key workers' in this sense. Our 'Stages document' outlines suggestions for what to do with students depending on how the levels of social restrictions may change during the ongoing pandemic; this, along with many other useful resources, will be kept updated on our website <https://www.med.qub.ac.uk/wp-gp/>

We will be supporting remote teaching sessions using 'Virtual Primary Care' resources on Wednesday afternoons to enhance students' access to authentic GP consultations while on clinical placement. Your students will likely appreciate some time within your attachment timetables to watch these consultation videos and prepare for these sessions.

They will ask you to complete your assessed elements/tutor reports in their E-Logbooks – links to which they will share with you at the start of the attachment.

This guide aims to highlight the learning objectives of the course and provide you with some suggestions that may help maximise the experience for both you and your student(s). Each student will spend 17 days in General Practice during 20/21 year 4, with the first 2 days delivered virtually by the QUB team and the next **three weeks** based in an appointed undergraduate teaching practice, supported by further QUB led learning (both 'real time' and other activities which students can engage with flexibly at times that work for them and for you). This year 4 module builds on GP experience in earlier years and is a springboard for time in GP in year 5.

We are very grateful for your continued support teaching and training our students especially under these difficult conditions and hope that you find having students a rewarding experience.



Dr Helen Reid PhD MRCPGP on behalf of the QUB
GP team.

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For updated information and useful resources
<https://www.med.qub.ac.uk/wp-gp/>

Students' prior experience

Students should have the following competences at the start of their time in GP. **Remember that they are undergraduates**, so each competence is considered in terms of their stage of study.

- Obtain a relevant history, using appropriate questions and responses, covering the following systems: cardiovascular, respiratory, gastrointestinal, genito-urinary, nervous system, musculoskeletal and dermatological.
- Examine the following systems competently: cardiovascular, respiratory, gastrointestinal nervous system, musculoskeletal and dermatological.
- Perform these basic clinical procedures and investigations: urinalysis, glucose using glucometer, venepuncture, PEFr measurement, spirometry, ECG.
- Recognise the normal ear, nose and throat. Distinguish a range of common conditions by history taking and examination, including the use of an otoscope.
- Recognise the normal features of the eye. Distinguish a range of common conditions by history taking and examination, including the use of an ophthalmoscope.
- Formulate a provisional diagnosis and differential diagnosis.
- Construct a patient problem list.
- Choose appropriate investigations.
- Begin to construct a patient management plan.
- Understand the pharmacology and therapeutic uses of commonly used drugs. Be aware of the particular precautions with regard to prescribing in young children, the elderly and those with liver and renal disease.

Learning outcomes

On completion of this module, the successful student should be able to:

Providing good clinical care

- Take an appropriate history and physical examination from a patient presenting in General Practice
- Be aware that symptoms and signs vary in their predictive value
- Perform some basic procedures that are routinely performed in primary care
- Diagnose and formulate a differential diagnosis for some of the common conditions that present in General Practice
- Interpret results from some of the commonly performed investigations that are carried out in primary care
- Formulate management plans for some of the conditions that are commonly encountered in General Practice

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- Demonstrate skills in therapeutics, including drug and non-drug approaches to the treatment of some of the common acute and chronic conditions that present in General Practice
 - Accept the inevitability of uncertainty in some aspects of General Practice problem solving
 - Develop a greater understanding of co-morbidity, polypharmacy and the intersectional journey that patients take across primary / secondary care interfaces
 - Have knowledge of some of the preventative activities that take place in the primary care setting
 - Be able to write accurate and safe prescriptions
 - Demonstrate the ability to produce accurate, legible and contemporaneous records of patients' health care

Relationships with patients

- Demonstrate effective consultation and communication skills with patients and staff
- Communicate with individuals who cannot speak English, including working well with interpreters
- Determine the impact of a patient's problems in the context of their life and social context
- Apply an ethical framework to approach challenging dilemmas encountered in GP
- Demonstrate willingness to involve patients in management plans

Working with colleagues

- Describe members and roles of primary healthcare teams and the important principles of team work
- Identify the importance of a primary / secondary care interface
- Describe some of the organisational approaches to the management of chronic disease

Curriculum guide for undergraduate students

The ethos of this course is to familiarise students with the discipline of General Practice. It is impracticable to cover the postgraduate curriculum. This list is not exhaustive but offers suggestions for core coverage.

Care of acutely ill people

- Acute anaphylaxis
- Acute asthma
- Acute coronary syndrome/ chest pain
- Appendicitis
- Shortness of breath

-
- Meningococcal disease
 - Collapse

Cancer

- Common cancers
- Palliative care

Care of children and young people

- Common infections
- Constipation
- Earache
- Febrile children
- Gastroenteritis
- UTI

Care of older adults

- Stroke
- Dementia

Women's health

- Contraception/ emergency contraception
- Menopause
- Menstrual problems

Men's health

- Benign prostatic hypertrophy
- Testicular lumps

Mental health problems

- Alcohol and drug misuse
- Anxiety related disorders
- Depression
- Insomnia

Cardiovascular problems

- IHD
- Heart failure
- Hypertension
- Primary and secondary prevention

Digestive problems

- Abdominal pain
- Dyspepsia;
- GORD
- IBS
- Rectal bleeding

ENT problems

- Ear wax
- Glandular fever
- Hayfever

-
- Otitis media
 - Otitis externa
 - Sinusitis
 - Sore throat

Eye problems

- Acute conjunctivitis
- Red eye
- Temporal arteritis

Metabolic problems

- Diabetes
- Hyperlipidemia
- Obesity
- Thyroid disorders

Respiratory problems

- Asthma
- Cough
- COPD
- Respiratory tract infections (upper/ lower)

Musculoskeletal problems

- Back pain
- Common injuries and sprains
- Gout
- Osteoarthritis and inflammatory arthritis

Skin problem

- Acne vulgaris
- Common skin infections
- Eczema
- Psoriasis

Renal problems

- Chronic Kidney Disease
- UTIs

Neurological problems

- Epilepsy
- Headaches
- Subarachnoid haemorrhage

Other

- Influenza
- Dizziness
- Shingles
- Tired all the time

Online resources

Apart from lectures, small group work and clinical placements, students are also provided with a number of online learning resources (<https://www.med.qub.ac.uk/portal/>). Tutors do not require access to this Portal, though you can register for access should you wish. All useful information you as tutors may wish to access through the year can be found on our website:

<https://www.med.qub.ac.uk/wp-gp/>

Some recorded lecture content and quizzes are available to students at:

<https://mediasite.qub.ac.uk/Mediasite/Channel/mediasite-admin-gp-placement-year-4>

Student learning will be supported by three other key online resources:

Virtual Primary Care

This is a collaboration across UK medical schools, offering access to authentic GP consultation videos recorded as part of the 'GP Behind Closed Doors' series. Several of the QUBGP team have been involved in reviewing the consultations and preparing supporting educational materials. QUB will facilitate virtual small group sessions (Wednesday PMs while the students are on placement) to support students' access to clinical consultations when other opportunities may be limited. We will be asking students to watch some consultation videos in advance of these sessions, and your support in making space within their timetables to do this would be appreciated.

Capsule <https://www.capsule.ac.uk/>

This is case-based online resource, again produced as a collaboration across UK medical schools. Students have access to a vast range of cases and quizzes with feedback and further links – with the material pitched at a great level for them. There are around 40 GP cases (some relatively short, others which might take students 45-60 minutes to work through). A summary of the case content will be available for both you and the students. While some students may elect to work through the cases in their own self-directed way, they are likely to maximise their learning if you were able to signpost them to specific cases covering areas that they had perhaps not had any exposure to, or following on from a specific phone consultation.

Speaking Clinically <https://speakingclinically.co.uk/>

This resource contains authentic patient video clips of people talking about a range of >300 conditions. Most videos are just 1-3 minutes long, and it's fair to say they do have a secondary care orientation. While this could never replace authentic patient contact in GP, it is nonetheless another resource if other opportunities were limited. We have prepared two 'Virtual GP Surgeries' that students could work through independently or supplemented by discussions/debrief with you as their tutor. Each virtual surgery signposts them to six patient clips, each of which is followed by some prompt questions around how this person might present in GP. Feel free to think of your own questions/areas for discussion!

If you would like personal access to Capsule and/or Speaking Clinically, we can facilitate personalised logins etc. Please email Frances Price (f.price@qub.ac.uk), explaining that you are a GP tutor and she will make the necessary arrangements. We hope 'VPC' will go live in October 2020 and will post further information about this resource on our website.

Other resources

We know that many of you will be familiar with all kinds of other resources which you may wish to signpost your students to (many already love the likes of gpnotebook and <https://www.gpni.co.uk/> website may also interest some.) Students themselves are well aware of an ever-growing array of educationally targeted material on various platforms, not least a proliferation of YouTube channels and Instagram offerings. The list that follows are simply suggestions from some of your GP peers; we will endeavour to maintain an up to date list of other suggestions on the website.

https://www.pennine-gp-training.co.uk/CSA_case_videos.html

<https://www.bradfordvts.co.uk/communication-skills/medical-explanation-videos/>

And finally, some reading suggestions

It's All in Your Head (Suzanne O'Sullivan)

With the End in Mind (Kathryn Mannix)

Being Mortal (Atul Gawande)

A Fortunate Man: The Story of a Country Doctor (John Berger)

Illness (Havi Carel)

None of these are in any way essential reading!

On the first day

We ask students to contact the practice before their arrival to make day 1 arrangements. Indeed, we often get feedback from students delighted and astonished that they are addressed by name when they first arrive!

Ideally, tutors should complete a programme of activities across the three weeks on placement. This allows the students to structure their attachment and learning. Students also appreciate an induction and orientation to the practice (eg where the coffee room/ toilets are etc).

Here are some areas that we recommend you should cover:

- Brief overview of practice: population size, doctors, computer system
- Introduction to other staff members
- Layout of practice
- Place where students can leave their coat, bag and belongings
- Facilities such as the toilets and area for tea/coffee
- Any important safety issues e.g. fire escape routes, personal safety
- Any student special circumstances / disabilities that are relevant for the GP tutor (and practice) to know about
- Any practice specific protocols around social distancing, PPE and additional hygiene measures (all year 4 students are timetabled a generic session around COVID-19 issues as part of their year induction on 23/9/20)

What students expect from their tutors:

- Timetable organised according to practice and student needs
- Welcome/induction and review learning needs assessment
- Progress updates during their attachment
- Feedback on their performance during their attachment
- Completed GP tutor report, STAT and 2 mini-CEX assessments completed in their e-Logbooks

What tutors expect from their students:

- Willingness to identify and work on their learning needs
- Early warning of particular interests or predicted problems/absences
- Honesty if they feel uncomfortable, unhappy or out-of-their-depth
- Insight – never over estimating their abilities
- Punctuality, courtesy and respect to all staff
- Treating patients with respect and sensitivity – particularly mindful of confidentiality
- Seek, accept and reflect on feedback
- Show independence and motivation in completing learning tasks
- Professional appearance and behaviour at all times (all year 4 medical have been provided with 2 pairs of QUB scrubs for use on clinical placements)

e-Logbook

20-21 is paper-free for all QUB clinical modules, so the A5 logbook is no more. Students are asked to complete an e-Logbook and experience record, designed to help them reflect on their performance and progress during their attachment. Please ensure your student has your preferred email address so that they can share access with you to this live document. The e-Logbook itself is a standard format across all QUB clinical placements – and contains all the practical information you need to make completing the 'tutor elements' (x2 mini CEX, STAT and your tutor assessment of the student) as straightforward as possible. Although the format is different, the drop-down menus contain all the same wording/questions that you will be familiar with from the paper logbook.

Please note that both students and tutors will have access to all areas of the e-Logbook. It will be emphasised as a probity issue to all clinical students that they should not modify a tutor's assessment in any way. Please do let us know at gpadmin@qub.ac.uk if any issues.

Learning needs assessment

Prior starting their attachment, students are asked to complete a learning needs assessment in their e-Logbook. The purpose of this tool is to help identify key areas that students need to focus on during their attachment – it might be helpful to look at this section of your student's logbook at baseline as they all obviously rotate through year 4 modules in different orders and will have varied prior experiences.

Practice attachment timetable

At the beginning of the student's attachment, we would ask you to complete, as best you can, an attachment timetable. The main learning tool for students in practice is consultations. Students appreciate the opportunity to interact with real patients, be that in person or by phone/video. We recognise that 20/21 will be challenging in terms of opportunities for clinical exposure and completing some of the assessed elements such as mini -CEXs. A detailed breakdown of how these could be completed in various scenarios will be maintained as a live 'Stages' document on our website.

Experience of the practice team and wider community MDT

Practice teams and ways of working are constantly evolving in response to many factors. Aside from global pandemic provoked change, other drivers of new ways of working across multiprofessional teams include including changing patient needs, workload, and a general 'left shift' in health towards more community-based care. Multidisciplinary team (MDT) work is vital in the delivery of effective health care in General Practice.

During your student's attachment we would like them to gain a breadth of experience of the extended primary health care team. Traditionally, students have 'sat in' with, and worked alongside, other members of practice staff. This might, for example, involve spending a session working alongside reception staff as the first point of patient contact, or participating in treatment

room activities such as phlebotomy and wound care. Many students might spend half a day on visits with a District Nurse, or in a local Healthy Living Centre learning about the role of Social Prescribing. We recognise that in 2020-21, opportunities for some of these activities may be limited. Nonetheless, we encourage as much experience of the breadth of MDT roles as possible – which may be through observation or conversation. Two short videos explaining something of the role of district nursing and health visiting are available on the GP section of the portal for any students experiencing particular challenge gaining this breadth of exposure.

Interprofessional learning to advance skills and attitudes for interprofessional collaboration during GP clinical attachments

We ask the students to note which MDT members they encounter – this list is by no means exhaustive and **we are fully aware that not every practice will be able to facilitate student access to all these people.**

Practice based pharmacist

(Advanced) Nurse Practitioner/Practice nurse

First point of contact physiotherapist

Treatment room nurse

District nurse

Health visitor

Practice manager

Reception/administration staff

Counsellor/Mental health worker

Social worker

Social prescriber (perhaps working outside practice, e.g. through a Healthy Living Centre)

Mini-Clinical Evaluation Exercise (CEX)

The mini-Clinical Evaluation Exercise (mini-CEX) is one of a number of workplace-based assessments (WBAs) used in clinical settings to help the teaching and assessment of clinical skills. In common with other WBAs, its primary purpose is to provide structured teaching and feedback in a particular area of clinical practice.

The mini-CEX is a consultation conducted by a student, observed and critiqued by their GP tutor. The GP tutors' evaluation is recorded on a form which is used to provide students with structured feedback. The strength of WBAs, such as the mini-CEXs, is that GP tutors can review students' performance across a wide range of domains of competency (*e.g. history taking, examination skills, communication skills, patient safety, professionalism*). Furthermore, mini-CEXs allow students to demonstrate that they are making progress during their placement.

When are students required to perform their mini-CEX evaluations?

Students are asked to complete 2 mini-CEXs evaluations in their GP attachment. Ideally students should carry out one mini-CEX towards the beginning and one towards the end of their attachment.

What cases should be selected for mini-CEXs?

Ideally patients that the students haven't encountered before. Consultations can be in any modality/setting including phone consultations. You should seek permission from the patient that they are i) happy for the student to consult with them and that ii) you will be observing/listening in. *It is important that the GP tutor retains responsibility for patient care throughout the consultation and intervenes as and when required.*

What is involved?

GP tutors are asked to observe them consulting. Ideally during their mini-CEX, complete the mini-CEX evaluation form in the e-Logbook. This form will provide structure to feed back on the student's performance.

How long should the mini-CEX take?

There is no time limit to the mini-CEX, but most cases last 10-20 minutes. Debriefing usually takes up to 20 minutes to complete. The debriefing session should ideally be straight after the encounter, but can also take place at the end of the session.

How do I complete the mini-CEX form?

The forms are located within the e-Logbook. An example form is given overleaf.

Student's name	Miss Paddy McConnell			
GP tutor's name	Dr Mary West			
Clinical setting	GP surgery Face to face <input checked="" type="radio"/>	GP surgery phone consultation <input type="radio"/>	Other <input type="radio"/>	
Summary of clinical problem				
Patient with abdominal discomfort. Likely diagnosis of IBS				
Type of consultation	New presentation <input checked="" type="radio"/>	Review <input type="radio"/>	Other <input type="radio"/>	
Please grade the following areas:				
	Below standard expected of a 4 th year medical student	Meets standard expected of a 4 th year medical student	Above standard expected of a 4 th year medical student	n/a
History taking	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Physical examination	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Clinical judgement	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Professionalism	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Global impression	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Anything especially good?				
Thorough examination. Appropriately discussed 'next steps'.				
Suggestion for development?				
Took a very comprehensive history. Might consider a more 'focused history'.				
GP tutor's signature	Dr Mary West			
Date	6/10/20			

Student teaching activity (STAT)

Teaching is highlighted by the GMC as an important skill for all healthcare professionals. Therefore, during clinical attachments we ask students to deliver a short teaching presentation to you (and/or

other members of the practice team/locality group for those in a subdeanery pilot area practice). Presentations can be 'in person' or virtual. Towards the start of your module we would ask you to agree a topic (could be clinical or based on any quality improvement or audit activity undertaken during attachment). The form of the presentation can either be a:

- '10 x 10' (i.e. maximum 10 slides to be presented in a max of 10 minutes) PowerPoint (or other form of software e.g. keynote) slide presentation and / or
- Two (Maximum) A4 sheets of 'Key aspects' relating to the topic.

Students are expected to present in either the second or final week of their clinical attachment. Further guidance for students (example templates also on their Portal) is available in the e-Logbook.

Example STAT feedback form

GP tutor's name	Dr Bob Jones				
Clinical topic	Carpel Tunnel Syndrome				
Form of presentation	Power Point ●	Two A4 page summary ○	Other (Please state_____)		
	Exceptional	Very good	Good	Borderline	Poor
Content	●	○	○	○	○
Oral presentation skills	○	○	●	○	○
Quality of presentation materials	○	●	○	○	○
Use of evidence-based resources	○	●	○	○	○
Global impression	○	●	○	○	○
Tutor comments:					
Presented to practice team via Zoom meeting. Excellent summary of the assessment, lx and management of CTS. A little nervous during presentation but this will improve with practice. Up-to-date evidence resources used and also considered local services in their presentation – we all learnt something new!					
Presentation kept within 10mins?	Yes x		No		
Kept within 10 slides/2 A4 pages?	Yes x		No		
Recommend to other students?	Yes x		No		
GP tutor's signature	Bob Jones				
Date	30/9/20				

Tutor's evaluation

GP tutors are asked to complete feedback about their students. Feedback provided by GP tutors is greatly valued by our students - particularly given the fact that GPs observe students on a more intense basis than most other clinical tutors in their undergraduate training. Such feedback provides students with useful information that reinforces good aspects of their learning, but also identifies areas of teaching and learning that could be improved.

Example feedback:

Please comment on students' knowledge, skills and attributes that are good

Very pleasant student. Fitted well into team and liked by staff. Demonstrated sound communication skills. Developed rapport with patients. Enthusiastic about learning.

Please comment on aspects of students' knowledge, skills and attributes that could be improved upon

Lacked knowledge regarding paediatrics and Obs + Gynaecology – this will undoubtedly improve during the rest of their year and relevant attachments. Could improve on some aspects of pharmacology – suggest reading COMPASS therapeutic notes on common conditions.

Course assessment

On the last day of the module, students will take part in a number of exercises aimed at consolidating their learning in GP. Although this is intended to be largely formative, *attendance and the submission of a satisfactorily completed e-Logbook are essential to pass the module.*

End of year assessment

Two 'Single best answer' papers and an integrated OSCEs will be held at the end of the academic year.

Students in difficulty

The module can be demanding. Most students enjoy their time on placement, but we are aware that some students, for a variety of reasons, may experience difficulty. They may potentially have personal or health problems. If so, they should consider speaking to their faculty tutor or their own GP. If students have had a recent life event such as a death in the family, we encourage them to let you know, as well as QUB staff.

If you have any concerns about a student's welfare or performance, please do contact the QUB team.

MODULE TIMETABLE

2020/21 GENERAL PRACTICE MED4014

All teaching sessions delivered by Zoom (students to be advised of links)

HOLIDAYS*	TIME	Group F	Mon 05 Oct – Fri 09 Oct [Teaching Thurs & Fri]	Mon 12 Oct - Fri 16 Oct	Mon 19 Oct – Fri 23 Oct	Mon 26 Oct - Fri 30 Oct
		Group D	Mon 09 Nov – Fri 13 Nov [Teaching Thurs & Fri]	Mon 16 Nov – Fri 20 Nov	Mon 23 Nov – Fri 27 Nov	Mon 30 Nov – Fri 04 Dec
		Group E	Mon 14 Dec – Fri 18 Dec [Teaching Thurs & Fri]	Mon 04 Jan – Fri 08 Jan	Mon 11 Jan – Fri 15 Jan	Mon 18 Jan – Fri 22 Jan
		Group C	Mon 01 Feb – Fri 05 Feb [Teaching Thurs & Fri]	Mon 08 Feb – Fri 12 Feb	Mon 15 Feb – Fri 19 Feb	Mon 22 Feb – Fri 26 Feb
		Group A	Mon 08 Mar – Fri 12 Mar [Teaching Thurs & Fri]	*Mon 15 Mar – Fri 19 Mar	Mon 22 Mar – Fri 26 Mar	*Mon 29 Mar – Fri 02 Apr
		Group B	Mon 19 Apr – Fri 23 Apr [Teaching Thurs & Fri]	Mon 26 Apr – Fri 30 Apr	*Mon 03 May – Fri 07 May	Mon 10 May – Fri 14 May
		Week 1	Week 2	Week 3	Week 4	
MONDAY	am	(Cancer studies)	PRACTICE ATTACHMENTS			
	pm					
TUESDAY	am	(Cancer studies)	PRACTICE ATTACHMENTS			
	pm					
WEDNESDAY		(Cancer studies)	2 - 4.30pm Small Group Virtual Primary Care (VPC) Session		2 - 4.30pm Small Group Virtual Primary Care (VPC) Session	Wed PM: ECHO/VPC (group allocations and times TBA)
THURSDAY	am	9.00am – 10.30am Module Introduction to General Practice (HR, NH) 11.00am – 12.30pm GP 'hot topics' and scenario group work (HR)	PRACTICE ATTACHMENTS			
	pm	2.00pm – 4.00pm Activate your consultations (GK, JF)				
FRIDAY	am	Emergencies in Primary Care (GG) 9.00am – 10.45am: (Groups 1 – 3) 11.15am – 1.00pm (Groups 4 – 6)	9.00am–10.30am GP Common Conditions introduction followed by optional Q and A on self-directed resources/Virtual surgeries (HR) Self-directed learning		PRACTICE ATTACHMENTS	
	pm	'CCTV' sessions (virtual in small groups) (CD) Times and session links TBC	Common Conditions in Primary Care (GG + pharmacy colleagues) 2.00pm – 3.30pm: (Groups 1 – 3) 3.30pm – 5.00pm: (Groups 4 – 6)			
			ASSESSMENT MODULE DAY 9.30am START			

General Practice MED4014 University teaching team 2020-2021

Module Co-ordinator: Dr Helen Reid (HR)

Dr Carla Devlin (CD)

Dr Jonathan Fee (JF)

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