Students’ Guide for Medicine in the Community-Based Course

Medicine in the Community (MIC) 2022-23

https://www.ucl.ac.uk/iehc/research/primary-care-and-population-health/study/mbbs-pc-med-ed/year4
Departmental Contact Details

**Interim Course Administrators**  
Rosemary Koper & Angelika Zikiy  
Research Department of Primary Care & Population Health  
Institute of Epidemiology and Health Care  
University College London  
Upper 3rd Floor, Royal Free Campus  
Rowland Hill Street, London NW3 2 PF  

E-mail: [pcphmeded@ucl.ac.uk](mailto:pcphmeded@ucl.ac.uk)

**Course Lead**  
Dr Aniruthan Renukanthan  
Research Department of Primary Care & Population Health  
UCL Medical School  
Rowland Hill Street  
London NW3 2PF  

E-mail: [a.renukanthan@ucl.ac.uk](mailto:a.renukanthan@ucl.ac.uk)

Please note it is best to contact the academic lead via the administrators.

Website: [https://www.ucl.ac.uk/iehc/research/primary-care-and-population-health/study/mbbs-pc-med-ed/year4](https://www.ucl.ac.uk/iehc/research/primary-care-and-population-health/study/mbbs-pc-med-ed/year4)
Teaching Dates for the Year

MEDICINE IN THE COMMUNITY
University College Medical School

Year 4 Block Dates 2022-23

<table>
<thead>
<tr>
<th>Teaching Block</th>
<th>Start Date</th>
<th>Finish Date</th>
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<tbody>
<tr>
<td>Block 1</td>
<td>26th September 2022</td>
<td>16th December 2022</td>
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<tr>
<td>Block 2</td>
<td>Monday 2nd January 2023</td>
<td>Wednesday 5th April 2023</td>
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<td>Block 3</td>
<td>13th April 2023 (NB Easter 6th-12th April)</td>
<td>7th July 2023</td>
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Assessments 2021-2022:

Written:
Summative: WB 10th July 2023
End-of-Module: To be arranged by Module Leads
End of Year OSCE: WB 18th – 20th July 2023
Organisation of Medicine in the Community

Students in groups of 4-6 spend one day approximately every 4 weeks (either Monday, Tuesday or Friday) in a practice. There are 9 or 10 days (18-20 sessions) over the three blocks in the year. (Some practices may teach up to three groups of students, i.e. on Mondays, Tuesdays and Fridays).

General Aims of the Medicine in the Community Course

In hospital, patients usually have more serious and rare illnesses, which can give students a distorted perception of the prevalence and prognosis of certain medical conditions.

In the community, we hope students will have a chance to see relatively well patients with stable physical signs and illustrative medical histories at different stages of disease progression. You should be introduced to the complexity of management of patients living with longstanding problems and be able to see the impact of chronic illness on the lives of patients and their families. Above all, try to gain perspective on what “medicine” really is, and that 90% of all patient contact happens in GP.
Aims of MIC Programme for Year 4 students
- To learn clinical method in a general practice setting, in order to complement hospital-based teaching.
- To focus on general medical topics, including investigations and management.
- To build on students' knowledge and skills as they develop through the year.

Students’ Outcomes for the Whole Attachment
By the end of the firm, you as a student should be able to:

- Communicate effectively and courteously with patients of different cultural backgrounds and with colleagues.
- Demonstrate the ability to take a comprehensive or focused history including psychological and social aspects.
- Demonstrate the ability to perform a competent and systematic examination relevant to the patient’s problem.
- Demonstrate the skill of formulating a logical differential diagnosis for common presentations.
- Recognise the impact of the problem on the patient’s life.
- Demonstrate the skill of creating a problem list of active and inactive problems.
- Demonstrate the ability to formulate a logical plan of investigations including the use of “near-patient testing”, and initial management plans.
- Demonstrate the ability to correctly interpret simple investigations and results and modify diagnosis and management accordingly.
- Recognise the patterns of presentation of illness in the older person, and the concepts of co-morbidity and polypharmacy.
- Demonstrate the ability to negotiate with patients, using appropriate terms, the diagnosis, the rationale for investigations, and management and gain consent for this.
- Understand the concept of medically unexplained symptoms, that a diagnosis is not possible for all presentations and how to tolerate such diagnostic uncertainty.
- Make appropriate use of available resources including the British National Formulary and on-line resources.
- Have a basic understanding of the principles of rehabilitation.
- Demonstrate the ability to clearly and concisely present a clerking in verbal and written formats.
- Demonstrate the ability to evaluate his/her own performance and to give and receive feedback.
- Use of IT in health care- keeping records, particularly the electronic patient record.
- Prescribing - effectively, safely.
- Respect and understand the professional contribution of other health care workers.
From the UCL MBBS Curriculum Map

https://uclms-asr.app/map

Introduction to the MBBS Curriculum Map
The curriculum map is a guide to underpin students’ learning through teaching, personal study and clinical experience and can help you prepare for assessments. Medicine is vast and complex; no map can be exhaustive. This is UCLMS’ first electronic curriculum and there will be dynamic improvements as the map evolves. UCLMS has taken all reasonable care to ensure that the content is up to date.

Specifically for the MIC course - Year 4 / Medicine in the Community

**ILO 1 of 6** Develop an understanding of ethical and legal issues involved in community-based medicine.

**ILO 2 of 6** Develop an understanding of the involvement of primary and secondary care services for patients, and the interface between them.

**ILO 3 of 6** Develop attitudes appropriate to being a good doctor.

**ILO 4 of 6** Develop communication and clinical skills in a community/GP setting.

**ILO 5 of 6** Diagnose and manage common clinical problems.

**ILO 6 of 6** Employ core clinical skills with an emphasis on cardiovascular, respiratory, gastrointestinal, and locomotor system

(ILO = Intended learning outcome)

The Key Objectives
- To practice core clinical skills with an emphasis on cardiovascular, respiratory, GI and loco-motor systems.
- To develop communication skills and clinical skills.
- To diagnose and manage common clinical problems.
- To develop attitudes appropriate to being a good doctor.
- To develop an understanding of ethical and legal issues involved.
- To develop an understanding of the involvement of primary and secondary care services for patients, and the interface between them.
**How will I learn in GP?**

Every tutor will deliver their teaching differently but at its heart it should be about learning medicine with and from patients.

A session could be based around tutorials or learning basic examination skills. This should involve clinical contact, and this should be around the **core components** for the current module. You will mostly be approaching a problem from a symptom perspective, tying this in with a real patient, with the opportunity to take a history, examine and present your findings.

Other learning opportunities such as tasks around writing referral letters, (shadowing) prescribing or managing medically unexplained symptoms.

You may also be involved some service provision e.g.: a teaching surgery with longer appointment times and perhaps you the students seeing the patients first, then presenting. Ideal examples would be a full Diabetic review, looking at a post-operative patient or doing an annual review for someone with a learning disability.

Other staff members may teach e.g.: doing a session on asthma management with the practice nurse doing asthma checks (in module A). GP Registrars or F2s may also teach you.
Specific topics that may be discussed as they are common, important and also come up in formal assessments.

You will need to be able to discuss the underlying pathology, physiology, differential diagnosis, and management of the following conditions.

**BLOCK A**

- **Cardiovascular System:**

Hypertension, Heart Failure, Ischaemic Heart Disease, Atrial Fibrillation and Valvular Heart Disease, mental health in chronic disease.

Students should understand the concepts and know the main causes of the above conditions, recognise them clinically and also learn about basic investigations and treatment.

** Other topics which may be covered: Deep Vein Thrombosis / Pulmonary embolus.**

- **Respiratory System:**

Asthma, COPD, Respiratory Tract Infections, Lung Cancer, Smoking Consequences and Prevention:

Students should understand the epidemiology and the key clinical features of making a diagnosis. They should be able to undertake spirometry, measure the peak-flow of a patient and interpret results, and also understand principles of management of asthma, and COPD including inhaled bronchodilators, corticosteroids and devices for inhaling drugs. Prescription of home oxygen may also be discussed.

** Tuberculosis, Pulmonary Embolism, Interstitial Lung Disease, Asbestos Related Lung Disease, Pleural disease, HIV infection, Anaphylaxis and Obstructive Sleep Apnoea are other topics which may be covered.**

- **Endocrine/ Diabetes**

Diabetes type I and II
  - Diagnosis, chronic management, co-morbidity (CKD, CVD, PVD, retinopathy etc)
  - Diabetes as model of a chronic disease- multi-disciplinary care, 1y/2y integration, use of IT etc.

Thyroid / hypothyroid treatment and monitoring

Management of the big NHS expenditure diseases such as COPD, falls and heart failure may be discussed, particularly in terms of disease management optimisation (for example in heart failure), early intervention (for example COPD exacerbations), and new models such hospital at home, case management (community matrons etc), and assisted/accelerated discharge schemes.
BLOCK B

Movement and digestive health
Students should understand how movement and gastrointestinal problems can impact on health. Within the loco-motor system students should consolidate their skills in examination of the locomotor system, particularly relevant to conditions seen in primary care such as back pain, OA hip and OA knees. You should understand “red flags” for back pain. Students should understand the differences between osteoarthritis and rheumatoid arthritis, have a basic understanding of the systemic effects of rheumatoid and some basic understanding of how prescribing of disease modifying agents can impact on individuals and their doctors in terms of prescribing safely.

In gastrointestinal health we suggest looking at dyspepsia and change in bowel habit as important GI symptoms in primary care and how to manage them safely. Bowel cancer may be a useful condition to think about the transition to end of life care and palliation (although a patient in the practice with any common cancer can usefully be discussed in this domain).

- Osteoarthritis/Rheumatoid Arthritis,
  - Early RA diagnosis
  - Poly-pharmacy/ safe prescribing e.g. opiates/NSAIDS in the elderly
- Dyspepsia,
  - Primary care management (test and treat), when to refer, opportunity for health promotion lifestyle advice (alcohol, smoking etc)
- GI cancer.
  - Change in bowel habit/ FOB screening
  - Palliative care

Abnormal tests e.g. LFTs
BLOCK C

Neurology/ ID/ renal/ haematology
Students could usefully focus on diagnosis of diabetes and its long-term chronic disease management in this block (don’t forget to talk with practice or specialist nurse if you can here). Secondary prevention and cardiovascular risk might be discussed here.

Infectious disease might be a challenge but there may be an interesting patient with cellulitis, MRSA or similar condition then. Rational prescribing in primary care, the impact on hospital acquired infection and the impact of GP prescribing on self-limiting conditions such as URTIs are important. Try writing (mock) FP10s- always a useful insight into your knowledge.

Haematology may again be very patient dependent but if there is someone with a chronic haematological malignancy (CLL) then this would be useful. Alternatively, perhaps this would be good time to think about practice IT and looking at results- how would you manage a haemoglobin of 10, or a white cell count of 21?

Neurology in primary care might include people with Strokes or PD
• antibiotic prescribing
  o impact on HAIs, community pathogens
• anaemia
  o iron deficiency (as an indicator of GI disease), anaemia of chronic disease etc.
  o abnormal tests - borderline anaemia, indices e.g., high MCV.

Palliative care of conditions like lung cancer, heart failure and COPD should be covered, particularly if suitable and willing patients are available.

Other issues that have a very specific community focus, such as long-term nursing home management of chronic diseases, the role of (and impact on) carers, specific benefits such as the DS1500 for terminal patients, death and cremation certification should be integrated into the teaching where appropriate. The role of continuity in hospital discharge arrangements and community follow up can be highlighted, for example post MI rehab, acute exacerbation of COPD and asthma.

It is also very valuable for you as a student to be aware of the multidisciplinary team and what this constitutes, therefore it would be useful to spend some time with practice nurses, district nurses, and also to be informed about physiotherapists’, chiropodists’, and opticians’ roles. However, you will undertake a GP firm in your 5th year, which will cover many of these areas.
Location of your GP practice:

Most students will have to travel to attend the GP placement. Few central practices have the space to accommodate students so inevitably most of the practices are in the suburbs. We have tried to minimise your travel time based on the postcode provided but, in many cases, this is not possible. The average travel time is about 1 hour. Please use the TFL website or Google etc to plan your route and give yourself plenty of extra time so that arrive promptly for the sessions. We do not have any capacity to assist you with the travel costs but if these costs are an issue you should approach the Medical School to access their student hardship fund.

The Transport for London website has a journey planner which will give you detailed travel instructions if you key in the postcodes of where you want to travel to and from (http://journeyplanner.tfl.gov.uk/). You can also use the directions tool on Google Maps to offer alternative travel options (https://www.google.co.uk/maps). We do our best to allocate the whole group as fairly as possible taking into account your postcodes. If you did not provide us with your postcode as requested, you will have been allocated randomly to a practice.

For students with approved special needs/reasonable adjustments/special circumstances:

In the interests of confidentiality, we will not pass on any details of your circumstances to practices unless you ask us specifically to do so. We would, however, recommend that students inform the practice directly themselves of whatever information they feel would be necessary and helpful.
Other related teaching

As part of the Medicine in the Community programme we also have 2 taught days; a Mental Health Physical Interface Day in Module A and a Community Hub teaching day (also called the Primary and Community Care workshop day, CEPN day) delivered by Barnet Community Teaching Hub, in module B. You will receive more details about these teaching days closer to your allocated slot. Again, we expect full attendance and engagement at these sessions.

Primary and Community Care Workshop

The Primary and Community Care workshop consists of a 1-day workshop for all Year 4 students (in Module 4B).

The aim of this workshop is to introduce students to the breadth and variety of common clinical scenarios encountered in the general practice and community setting. Exposing students to the care delivered in these settings is important in improving their understanding of the patient journey and the management of patients in the context of primary care services and resources. The aims of these workshops are to:

- Practice and improve history taking and consultation skills
- Gain an understanding of what it means as a patient to live with a long-term condition
- Gain an understanding of the resources available in primary care and the community to manage patients
- Develop a shared care plan with patients with a focus on a person-centred approach
- Introduce the importance of the multi-disciplinary team in the community
- Introduce the importance of population health management, lifestyle discussions and managing risk in the primary care setting
- Learn in a peer-supported environment with interactive teaching involving patients as educators

These workshops will look at asthma, chest pain, and bowel cancer symptoms.
The Mental Physical Health Interface Day
All students will attend a Mental Physical Health Interface Day. The aim is to get students to explore the MH/medicine interface with a primary care perspective. In the morning you will meet real patients who have specifically agreed to discuss their experiences of having physical and mental health conditions. In the afternoon you will work through some common scenarios and role plays with GP tutors to develop your skills and knowledge.

Scenarios
- Chronic disease and anxiety depression
- Schizophrenia and CV risk
- Learning disability and physical health
- CHD, chest pain and anxiety
- Antipsychotics and obesity/diabetes
Assessment

During the GP placement you should aim to have completed:

- 1 MSR per term (by your main supervising GP or any health care professional who has observed you for one session or more)

You should get oral feedback on what your tutor feels are your strengths are and on what aspects you could improve and discuss and document them on your assessment form in the portfolio.

- 1 x CEX per term GP focused history and/or examination of one or more systems
- 1 x CBD per term GP focused history, exam & presentation

Attendance

Attendance to all parts of the GP placement is compulsory. This also includes campus-based teaching.

Your timetabled GP placement takes priority over any other teaching activity and your hospital teachers are aware of this. If you have difficulty with being released to your GP placement, please let me know.

Should any exceptional circumstances arise, and you are unable to attend a placement/workshop you should:

- if it’s a placement day, let your practice know directly as soon as possible
- fill in an Absence Form and inform the department via pcphmeded@ucl.ac.uk.
Student Safety

Overall, London is a safe city in which to live, study and work. However, as in all cities, there are steps that you can and should take to keep yourself safe when travelling.

Regularly updated advice on coronavirus for all UCL students and teachers is available at: https://www.ucl.ac.uk/coronavirus/

Here are some common-sense tips on staying safe on your student placements

1. Make sure you are absolutely clear where you are going before you set out and plan your journey to try and avoid any 'risky' areas.

2. If you have any concerns, try to speak to someone who has been to the place you are visiting to clarify the instructions.

3. Always ensure that someone knows where you are going and when to expect you back – especially if you are visiting a patient in their home.

4. If travelling on public transport don’t wait at deserted stations or stops and know the times of your trains or buses to avoid waiting. Sit in a compartment with other people or near the driver.

5. Don’t take shortcuts, stick to main roads and the directions you have been given.


7. Look after your valuables. Don’t carry more than you need to and keep your property out of sight. If you are carrying a bag, make sure it is properly closed and keep it close to you.

8. Don’t wear headphones when travelling in an unfamiliar area.

9. Remember to carry some form of identity — other people are entitled to know you are a genuine medical student, especially if you are visiting a patient at home.

Tips to prevent phone snatching:

- Be aware of your surroundings when using your phone.
- Try to avoid using your phone in public. If you do, use it away from the road and continually check your surroundings.
- **Stand away from roadsides and keep your phone close to you.**
- When checking for messages/directions, try to stand away from roads.
- **Be vigilant - what’s going on around you?**
- Look out for bikes and mopeds, especially if there are two people on one bike or if they ride on the pavement/in the opposite direction to traffic.
- Avoid taking your phone out when leaving a train or tube station.
- These are hotspots for criminals as they know people often check their phones when their signal returns.
- Have your phone lock on
- This way, no one can get into your phone right away.
- Go ‘hands free’ when walking and talking on your phone.
- If you can’t use ‘hands free’, then use your phone away from the roadside? It will make it harder to snatch.

Register with Immobilise
This will help police return your phone to you and help catch the thief:
www.immobilise.com

Make a note of your IMEI number so you can call your service provider if your phone is stolen.

Quote your 15-digit IMEI number, you can find this by tapping in *#06# - make a note of this now (not on your phone!). When you let your service provider know your phone has been stolen with your IMEI number they will be able to isolate your phone so no one can use it.

Available support from UCL Medical School
If you have safety concerns in relation to any of your student placements, please contact the relevant course administrator in the first instance. For GP placements this is via pcpmeded@ucl.ac.uk

UCL Medical Student Support Service is also available for help and advice if needed
https://www.ucl.ac.uk/medical-school/current-mbbs-students/mbbs-student-support

As well as the support that the Medical School can offer you, UCL itself has a host of support departments and resources. See:
https://www.ucl.ac.uk/medical-school/current-mbbs-students/student-support/how-we-can-help-you/ucl-student-support
Student Scholarship

There are lots of opportunities available. Please see website for bursaries and wards, conferences, career choice information, as well as exhibitions and events which may be of interest to medical students.

Student Support and Wellbeing

Some of the issues discussed during campus-based sessions and during the placement, like many elements of the medical course, may be relevant to your own experiences. If you find any aspects of this challenging, or feel you need further support please contact UCL medical school student support
https://www.ucl.ac.uk/medical-school/current-mbbs-students/student-support/how-we-can-help-you

We hope you will enjoy the programme.