

Stage 2 longitudinal placement- FAQs

KUMEC have been running the Stage 2 longitudinal GP programme since September 2017. This involves delivering teaching one day/week throughout the academic year (interspersed with 8 campus-based teaching days and breaks for school holidays). The 22 days in general practice (a choice of Tuesdays and/or Fridays) consist of a half day workshop for a group of students (lesson plans and online resource pack provided) and a half day where a pair of students participate in a teaching clinic, while the other students continue with self-directed learning, including visits to consented patients in their own homes (patient bank).

On campus days there will be no students at your practice, and you may choose to take this as a day off from teaching or join us (for an additional fee) as a campus-based facilitator. These campus-based days include our popular simulated clinics at RCGP headquarters Euston Square. Practices can choose to teach on either a Tuesday or a Friday, and some practices may choose to teach on both days.

Below we address some of the frequently arising queries with respect to delivering this longitudinal placement:

Overview of the programme

The programme runs from September to May and is made up 22 practice days and 8 campus days, during which students do not attend the practice. Campus days are either lecture-based or simulated clinics at the Royal College of GPs, and we recruit from our pool of campus tutors to facilitate these; there is no commitment to deliver these days in addition to the practice placement, but this is an option if you are interested. In addition to the practice days you are paid to attend a 'Tutor Induction', and then a 'Tutor Review Day' where we invite you to share experiences, troubleshoot and have an opportunity to meet other tutors - this always receives excellent feedback. In addition to delivering the programme, you are also the Educational Supervisor for

your students and this involves holding developmental one-to-one meetings with them, overseeing their academic progress, and completing their end-of-block sign offs in their portfolio. Whilst this role can be demanding, our tutors find it rewarding to support students in their progress over the course of an academic year.

The student e-portfolio (Rizr/kaizen) was introduced in 2020 whereby all assessments and progress are now documented in a more simplified and streamlined process.

How many students will I host?

Our gold standard number of students per placement is 8; this provides a good peer group dynamic and fits with the infrastructure of the programme design. Students also highly value this small group size, facilitating a more immersive experience and the opportunity to obtain more individualised feedback. Very occasionally we may send 10 students to a practice, but this is an individually negotiated arrangement.

Who will deliver the teaching?

Some practices have a single lead tutor delivering the teaching, whereas others have divided it up between various members of the team. The former has the advantage of clear lines of responsibility and continuity; however, the latter allows for greater flexibility around dates for the individuals and provides students with a more varied experience. We support either approach and actively encourage other members of the practice team, including GP trainees and allied healthcare professionals, to become involved in delivering teaching. Where the teaching is spread between team members it would be important to have a 'lead tutor' who is the Educational Supervisor for the students and is ultimately accountable for overseeing the placement and assessment, as well as delivering key workshops, such as the introductory and closing workshops. If any members of your practice team are new to teaching, please let us know so that we can provide a suitable level of support. A 'mix and match' approach could also be encouraged, with the 'lead tutor', for example, overseeing the student-led part of the workshop and touching base with the students, and then handing over to another member of the team for the remainder of the workshop.

Is there flexibility over content and days/times?

Each roughly five-week block will have a particular theme, and the campus day will be designed to support the subsequent practice days. We encourage tutors to follow the suggested week by week workshop timetable as outlined in the Quick Reference Guide and on Keats. A degree of flexibility can be applied – for example if workshops need to be swapped within a five-week block, if this is clearly communicated with the students.

Practices have the flexibility to decide on the timings for the day however students should be spending a full day in GP, either with a morning workshop with clinical teaching in the afternoon or vice versa. Students should not be expected to start before 9am or finish after 6pm, unless by mutual agreement.

Half the student cohort will be timetabled to have their longitudinal placement on a Tuesday, and half on a Friday. Due to other teaching commitments, students are very unlikely to have the flexibility to move between days on a regular basis, however there may be some flexibility to rearrange sessions by mutual agreement. We do not expect you to re-arrange sessions for absent students, however. Students must achieve 90% attendance or submit mitigating circumstances, so please let us know if students have missed two or more teaching days.

What if we cannot cover teaching due to sickness?

There may be occasions where staff sickness or other circumstances may lead to the GP tutor being unable to deliver student teaching. In the first instance we expect teaching practices to explore all avenues to cover this absence internally, and this may include involving other tutors or members of the multidisciplinary team. If this is not possible then please alert our team at the earliest opportunity, as we can sometimes source a 'locum tutor' to deliver the workshop component of the programme, with you making other arrangements to make up for the lost teaching clinic later. In such instances a fee of £572 (tbc) will be redirected from the practice to the locum tutor.

What are the student Roles?

When overall responsibility is shared across tutors and practices, there is a risk that some elements may become disorganised or disjointed. During the first induction session at the practice students

should be allocated various leadership roles as outlined in the workshop resources for that week and their induction. This will support GP tutors and also provide students with leadership opportunities.

What happens in self-directed sessions?

Whilst a single pair of students is engaged in their teaching clinic, the remaining 6 students will be expected to engage in self-directed tasks, set and supported by both the teaching practice and the stage 2 team, with several self-directed learning specific resources available on KEATs. We expect some of these tasks to be preparation of materials (e.g. student-led presentations) for the following week's workshop, and some to be visiting their 'bank' of patients at home, hospital, or following them to appointments.

Each pair of students will have a bank of two patients to follow up and will be allocated self-directed sessions in which to do this. We have written guidance documents outlining the types of patients and consent processes that are required. There is also a policy for students, allowing them to remotely consult with patients from their own homes where appropriate, and a guidance document for tutors to support this.

Students must always report back to a pre-identified clinician at the practice after any patient contact, to discuss the clinical significance of any new issues/symptoms, and also for their own safety.

What happens in a Teaching Clinic?

It is important that patients are at the core of our practice-based teaching. We will support the teaching clinic sessions (where a single pair of students participate in a reduced clinic with you) with a wide range of suggestions to keep students actively engaged, however we would like the content to remain at the discretion of the GP tutor. We do not want these to become merely 'observed' surgeries and would like you to encourage students to be active participants in history taking and clinical examination, as well as engaging them in discussion of the cases. **We recommend a two-hour clinic, during which 6 patients are reviewed.** In addition to the teaching

clinic, you may also opt to give students the opportunity to sit in and observe a clinic running at normal speed so they get a flavour for the GP's working day.

We have also written guidance to support you in delivering teaching clinics remotely, when students cannot attend face-to-face; this guidance was developed during the height of pandemic restrictions, but could still be applied if needed.

Students are timetabled to attend a total of **5 teaching clinics across the year**, with student pairs attending on a rotational basis.

What Assessments and paperwork are involved?

We will expect each 'lead GP' to complete the attendance record on our online portal, KEATS, and to feedback any student issues or other concerns to the Stage 2 Team.

GP Stage 2 Assessments:

- 1. Illness Scripts-**Students are required to write 5 illness scripts on cases seen in the teaching clinics alongside a write-up of any associated conditions.
- 2. MSF reflection:** A reflection on five Multi-Source Feedback (MSF) forms
- 3. Going above and beyond:** A written reflection on how students are developing as a professional through an experience or activity that is beyond their taught course.
- 4. Reflection on GP group assignment:** A reflection on their contribution to their GP group assignment (Clinical Humanities project).
- 5. Case Based Discussion:** 1 CBD required for the GP placement
- 6. Mini-CEX:** 1 mini-CEX required for the GP placement

These assessments are compulsory, but their purpose is formative, and we encourage you to provide feedback rather than a 'mark'. We will however be running a system of prizes for outstanding work and progress, and we encourage you to recommend students to us.

KEATS

Keats is the online learning platform at KCL which provides information to students and tutors on all the resources required for the Stage 2 programme. You will receive information and support on how to access and utilise this platform to support your teaching. You will find the weekly workshop plans on Keats and must log students' weekly attendance on Keats.

General

We have received a number of queries about what kind of summative assessments students have in their second year, and how you as their tutor and educational supervisor can best support them. Below is a summary:

1. **E-portfolio:** The e-portfolio is hosted on a platform called Risr (formerly known as Kaizen) and contains the assessment requirements for the GP and hospital placements. As their educational supervisor, you will be monitoring the progress of the students and reviewing that these assessments and the clinical skills are completed and submitted and the portfolio is up to date. You will receive information on how to access this portfolio using a password and support from the e-portfolio team.
2. **Progress Tests:** Students have three written progress tests over the course of the year which will include areas not yet covered in the course. The aim is to give students an idea of what knowledge they should be aiming for, and to observe an increment in their performance over the course of the year. Only students falling well outside of the expected standard would be flagged as a concern for progression.
3. **Objective Structured Clinical Examination (OSCE):** This is held towards the end of the academic year and is purely formative in Stage 2 Year 2, although attendance is compulsory. Students will be assessed at the end of Stage 2 Year 3 via a summative OSCE, which will include stations related to General Practice. We encourage you to ensure that students cover the list of 'core clinical skills achievable in GP' (available on Keats) and to teach them ad hoc discrete

skills that may arise in their teaching clinic, for example, otoscopy. This formative OSCE will be a fair reflection of the skills they have accrued during Year 2, for example, history taking, I.M. injection and use of behaviour change approaches. It should be viewed as an opportunity to practice these skills and have a sense of what their future summative OSCEs will be like.

Educational supervision

GP tutors will be the educational supervisors for the students throughout the year. **We expect an hour of the day to be dedicated to Educational Supervision, with two students per week meeting with you for around 30 minutes each.** It is likely to be easiest to arrange this with the students who are attending the teaching clinic, which ensures a rotational system. As educational supervisor it is your role to support students keeping up with the requirements of the portfolio, and to identify any problems, such as a student in difficulty. We do not expect you to manage these difficulties yourself - you would alert a member of our team, and this would be responded to and escalated as needed. You will have a chance to access faculty wide educational supervision training, and we ask that you attend at least one of these during each academic year.