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GP SUPERVISOR DESKTOP GUIDE
A GUIDE FOR GP SUPERVISORS
TEACHING THIRD YEAR STUDENTS
IN THE MChD CURRICULUM

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Introduction

This desktop guide is designed to assist GP supervisors who are teaching ANU medical students during their third year rotations. General practitioners are at the centre of the healthcare system. Australians see their GP more than any other health professional, with nine out of 10 people seeing their GP at least once a year. The general practice learning experience is therefore crucial for our students in their journey to becoming a doctor.

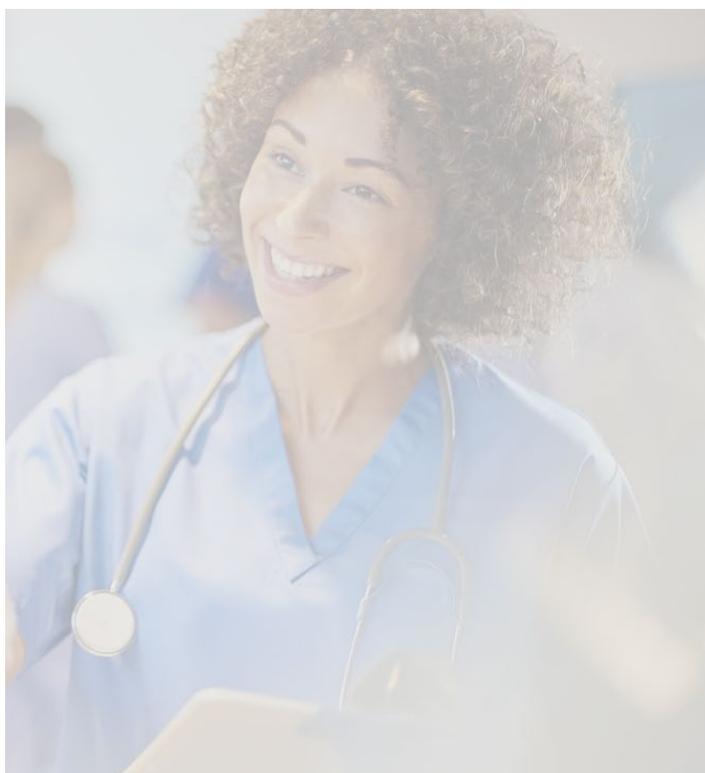
The postgraduate program delivered by the School of Medicine and Psychology (SMP) is a four year course that leads to the award of Doctor of Medicine and Surgery or *Medicinae ac Chirurgiae Doctoranda*. In years one and two students will have covered history taking and examination in all systems so that when they enter into year three and attend your practice they should be able to practice their history and examination skills in most contexts. In year three there is a greater emphasis on diagnosis, clinical reasoning and simple management. While they are in your practice we also hope they will learn skills around targeted history and examination when appropriate.

During third year students undertake a 6-week rotation in Canberra general practices, 6 weeks in a rural general practice in the surrounding region and 6 weeks in Paediatrics during the 19-week Integrated Child and Community Health block. (ICCH). During the other 19 weeks' students undertake rotations in medicine and surgery. One quarter of the third year cohort undertake the entire year in a rural region.

Doctor of Medicine and Surgery (MChD) outline

MChD program structure

Phase	Year	Description	Courses	Codes
1	1	Block 1: Foundation Block	Medicine 1A	MEDI8011
		Block 2: Cardiorespiratory and Renal	Medicine 1B	MEDI8012
		Block 3: Endocrinology and Reproductive Health	Research project	MEDI8013
	2	Block 4: Musculoskeletal and Neuroscience	Medicine 2	MEDI8020A MEDI8020B
		Block 5: Digestive Diseases and Nutrition	Research project	MEDI8013
		Block 6: Haematology, Oncology and Infectious Diseases		
		Block 7: Consolidation		
2	3	Two curriculum blocks comprised of a series of clinical rotations: Foundations of Internal Medicine and Surgery Integrated Community and Child Health	Medicine 3	MEDI8030A MEDI8030B
		Four clinical rotations: Senior Medicine and Surgery Block Acute Care Block Psychiatry and Addiction Medicine Block Women's Health and Newborn Care Block	Elective Medicine 4	MEDI8040A MEDI8040B



The Integrated Child and Community Health Block (ICCH)

During the child and community health block students rotate through three different experiences; six weeks' paediatrics, six weeks' rural practice and six weeks in urban general practice. For all rotations students have Wednesday as their university teaching day and they gather for seminars, case-based learning tutorials and fixed resource sessions. The rest of the time is spent in clinical placements with the exception of the urban general practice rotation during which they spend Fridays undertaking small group consultation skills practice.



The case-based learning tutorials form the backbone of the ICCH curriculum and students are expected to bring real cases from their general practice impedes experiences to discuss in small groups. Below is a table of the key topics covered during the CBL program. Students may ask you for help in case finding for specific topics where they have been nominated as the key presenter. The cases are presented in small groups with all identifying data removed to protect patient confidentiality.

Students need cases for the following CBL topics:

Week 1	Patient presents with an eye problem
2	Child with a fever or immunisation issue
3	Patient presents with ENT problem
4	Patient presents with vomiting or diarrhoea
5	Adult/Child presents for check-up
6	Worry over child's growth or development.
7	Patient presents with a skin problem
8	Patient presents with a chronic disease
9	Patient presents with abdominal pain
10	Patient presents with a cough or noisy breathing
11	Patient presents sad, worried or tired
12	My "heart-sink" consultation
13	Adult presents with a musculoskeletal problem
14	Patient presents with a fit, faint, funny turn or headache
15	Child with behavioural issues
16	Sexual health complaint
17	Child presents with a musculoskeletal problem
18	Patient presents with a urinary or bowel problem

Having students in your practice



Students are allocated a specific GP supervisor for their rotation but we encourage you to let them sit in with the different GPs in your practice who are keen to teach. We also encourage students to take the opportunity to learn from nurses and other allied health professionals that may attend your practice. Students are also encouraged to take advantage of any community placements such as a visit to the local pharmacy or local allied health professionals outside your practice.

It is important to introduce students to your practice when they first arrive and your staff and orientate them to the health and safety policies that are important within your practice. Reception staff need to be aware to let patients know that there is a student present so that they can consent to the student being present during the consultation. We have ANU School of Medicine and Psychology teaching practice signs that you can put up at the front desk or display when a student is present. Please contact us to request one if you don't already have one.

Students are expected to be present for two sessions each day. Some students may have after-hours commitments that require them to leave a practice early such as a part-time job or childcare pick up. If your practice has extended hours and your student is keen to stay, then that is fine however practices can only claim two sessional payments per day. A session is minimum of 3 hours.



The role of the GP supervisor

- Discuss with your student their learning needs and general clinical abilities. Establish what their confidence level is in the clinical setting and review their learning plan. This will enable involvement of your student in the clinical setting from the beginning of their placement.
- Encourage your student to actively participate in the consultation process. This includes history taking, examination, diagnosis and management. The student can also be actively involved when observing you with patients. Ask the student to reflect on a particular aspect of the consultation. For example, have them reflect on and describe how you approach management of a particular problem or patient
- Include your student in the broad range of clinical presentations and activities that you experience. Take your student on a house call, hospital or nursing home visit. Help students to understand the unique nature of General Practice. Students are trying to understand the rationale of when to do targeted history and examinations in third year.
- Encourage your student to actively participate in a range of practice activities. Involve your students in a range of activities and procedures such as venepuncture, injections, suturing, CST smears, ECGs etc.
- Be aware of the Case Based Learning topics. Your student will need to present a range of real patient cases during their Wednesday morning Case Based Learning (CBL) sessions.
- Participate in “MiniCEX” assessments. A MiniCEX is a brief opportunistic assessment of your student’s performance on an aspect of a clinical activity (e.g. part of the history, examination, management or procedure). MiniCEX provide you with the opportunity to directly observe and provide feedback to your student in an efficient and focused way by only observing a specific part of a consultation. Students need to have a minimum of 10 MiniCEX done by the end of their ICCH term. Your student will fill out an assessment form on their e-portfolio to capture this feedback.
- If there are any concerns about the student’s performance or progress, please contact us via the relevant ANU staff.
- Enjoy the opportunity to contribute to the learning of your student. Ask them for feedback about your practice and teaching style. Model for them that we are all lifelong learners as doctors. Share how you strive to strike a healthy balance between work and personal life.

Student portfolio items- what are they all about?

STUDENT PORTFOLIO ITEMS – WHAT ARE THEY ALL ABOUT?	
Students will need your assistance with the following assessment items from their 'portfolio'	
ASSESSMENT ITEM, portfolio number and description	ROLE of the GP SUPERVISOR
ICCH Learning Agreement Student identifies and records learning objectives for each rotation	Ask to review student's Learning Agreement and discuss their learning objectives for their placement with you.
GP Consultation Assessment of all aspects of an entire consultation conducted by the student and observed by the supervisor.	Mark observed consultation on Consultation marking form. Provide verbal feedback and fill out the e-form with your student .
Geriatric Long Case Student conducts a consultation with an elderly patient that is not observed and then <u>presents</u> the case to a clinical supervisor. They should outline the history, examination, differential diagnosis and management plan.	Help students to find patients. You will be asked to listen to a long case presentation and then mark the long case. The student will ask you to mark this task online.
MiniCEX Assessment of one or more particular clinical skill/s listed below as observed by the supervisor. <ul style="list-style-type: none"> ○ Patient history ○ Physical examination ○ Discussion of results ○ Patient education ○ Management discussion 	Be aware and supportive of MiniCEX requirements. Student will record observed skill in their E-portfolio Provide verbal feedback to the student and they will then record what they learnt from this feedback.
Supervisor Report	Provide student with feedback about their overall performance during the rotation and fill out the supervisor report with them on the e portfolio platform.
Chronic Illness assignment Student visits a patient with a chronic condition and interviews them and at least one other member of the family. They present this to their peers.	Help your student find an appropriate patient. GP to obtain consent from patient. Rotation 2 and 5 only.
Clinical skills log book – Students must have a range of clinical skills signed off by the end of their third year including: ENT exam, IM injection, ECG, peak flow, venepuncture, urinalysis, rectal exam.	Sign the task off on line with your student. Many students will complete these items during their medical and surgery rotations.

Providing constructive feedback and assessment to students

Giving students constructive feedback is critical to their future performance however it can be challenging and time consuming. The portfolio items are all designed so that you can provide specific feedback to students in a timely manner. The MiniCEX items are designed so that the students undertake one task only and the feedback is directed at this task alone. Most students actually learn best with being given one piece of concrete feedback at a time otherwise they can feel overwhelmed. Some of the other items such as the General Practice consultation or the Geriatric long case may take a bit longer. Feedback is best given if it is timely and close to the event however in a busy GP day this can be difficult so we suggest saving longer conversations for breaks or at the end of a session. For all tasks we suggest that you give verbal feedback at the time as appropriate and then at the end of the day spend a few minutes with your student filling out the relevant assessment e-form on their device. It is possible to fill out an assessment form yourself at a later time if you prefer this - ask the student to send you the relevant form. The student is responsible for their own learning and getting the portfolio items done and will show you the e-forms they need to complete.

The e portfolio system is called RISR and students will log in on their device and guide you through the process. They will ask you for an email address as this becomes the equivalent to a signature. Every time you fill a form out with them and they submit it you will receive an email confirming what you have submitted and showing you the details. No action is required on your part unless you didn't actually do this assessment. You can choose an option to give written feedback online yourself at a later time. In this case the student will fill out the beginning of the form and you will receive an email link to then log in and finish the rest of the assessment online.

Constructive feedback is about recognising what you did well and want to keep doing as well as recognising gaps. Third year students need specific feedback around what they are doing well and when their communication skills are effective- it is crucial for the development of their skills.

Below is a table of some principles for constructive feedback.

- Allow **adequate time** in a suitable environment
- **Descriptive**- Comment on the behaviour or what was observed – don't generalise to the person
- **Specific** rather than general
- **Sensitive** (to needs)- Use questions to encourage reflection
- Directed at **behaviours** that can be changed
- **Timely**- Provide feedback as soon as possible after the event
- **Less is more!**- Don't try and do too much- focus on small concrete changes
- **"feed forward"** providing the learner with information about their current performance that helps them to improve in future tasks
- **Normalise** learning as a lifelong skill

End of term assessment

At the end of the term we ask that you have a final face to face conversation with your student about their performance through the term and we have created the term assessment form to support this conversation. Part of medical training is to learn to go through a process of being assessed around professionalism and contribution as well as medical knowledge and skills so we will ask you to comment on their professional behaviour and participation as well in this process. The form asks you to comment on strengths as well as areas for improvement as it is really important for students to receive feedback about what they are doing well. Again, we suggest you do this on the student's device with them typing the details for you. You will receive a copy via email to confirm the process. If there are serious concerns about your student and you are uncomfortable with doing this face to face then please contact us to discuss the issues.

Tips for managing teaching time.

Before the consultation

- Brief patients prior to consultation
- Consider modified "wave" scheduling if you have extra space/room for example

9.00 – 9.15 Doctor sees patient A, student takes history from patient B

9.15 – 9.30 Doctor reviews patient B with student

9.30 – 9.45 Doctor sees patient C, Student types notes on patient B

9.45 – 10.00 Doctor sees patient D with or without student

During the consultation

- Ask the student to review the patient's notes and/or take a history while you see another patient.
- Assign student a task e.g. take vital signs while you are typing notes
- Have student look up something in the patient record while you are examining the patient
- Have student enter patient notes
- Ask them to look something up for you ie. Guidelines, latest evidence etc.

After the consultation

- Type referral letters and/or patient notes
- Research answers to difficult questions/EBM questions/topics of interest
- Have a project or tasks that students can do if you are running late or need to see patients alone.

Enhancing your own skills as a GP Supervisor

Being a supervisor can be very rewarding and having students in your practice is an opportunity for you to make sure that the next generation will look after your patients properly. Students can help you in all sorts of ways – they can look up latest evidence, they can chat to a patient while you are called away, they can take a long history with fresh eyes from a patient with chronic disease and maybe find something new about that patient that you didn't realise. For many of us the uncertainty of General practice can be daunting but having a student can help you realise what an amazing job you do and your patients will often share with the student what a great doctor you are, giving you an indirect compliment. This can enhance your day. Ultimately you become the gold standard GP and many students will be inspired to choose General practice because of their placement. It has been exciting to see many of our ANU alumni now take on the role of GP supervisor and support the next generation of students.

The medical school holds a number of teaching workshops each year to help you connect with colleagues, debrief and improve your teaching skills. We will let you know when they are occurring through email invitation. .

Your practice should also have a copy of **Building a Community of Learning in General Practice**, by Katrina Anderson and Jenny Thomson. This book has lots of information and tips for enhancing teaching in your practice specifically around bringing all your learners together. There is now a link on our landing page to the website which is a more user-friendly version of the book.

Finally, we want to acknowledge and thank you for your dedication and hard work on behalf of our students. The work of General practice is about life- long learning and so students are an important collegiate part of all our learning journeys as practitioners. Thank you for allowing them to be part of your journey and your practice.

Please don't hesitate to contact the medical school if you have any questions or issues. You will find other information around placements and payments on our webpage.

For further information, please refer to our web page:

[General Practice teaching in the MChD program | ANU School of Medicine and Psychology](#)