

General Practice Course 2021: Information Booklet for GP Clinical Teachers



The following pages outline information which we hope will assist you in your time with the medical students during their General Practice (GP) Course, and enrich the teaching and learning experience for you, your practice staff and the students.

Thank you very much for your interest and involvement in the training of University of Queensland medical students. We hope that you find the experience enjoyable and rewarding.

We encourage you to visit the Primary Care Clinical Unit website at <https://general-practice.medicine.uq.edu.au> and explore the Our Teaching, Research and GP Teachers sections in particular. A regular GP Teacher Newsletters is emailed to our teaching practices, and also available on our website.

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GP Placement Dates 2021	
Placement 1	18 January - 28 February
Placement 2	1 March - 11 April
Placement 3	19 April – 30 May
Placement 4	28 June – 8 August
Placement 5	9 August – 19 September
Placement 6	27 September – 7 November

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1. What's New in 2021

2019 saw substantial changes to Years 3 and 4 (Phase 2) of the Medical Programme. The subjects in these years have changed such that the previous rotation model gives way to semester-long subjects. This means for the General Practice course, students will enrol in the course for 18 weeks rather than 8, but they rotate sequentially through 6 weeks blocks of GP, Mental Health and Rural Health or Medicine in Society courses during Year 3. Our Ochsner cohort will complete the GP course alongside Medicine in Society and the Personal Learning Block (or elective) in year 4.

In 2021, we continue to refine the large changes introduced in 2019. This includes the Introduction of Workplace Based Activities (WBA). Students in all clinical placements in their 3rd and 4th years will need to both conduct and be directly observed doing different clinical tasks such as history taking and examinations, as part of a year-long WBA course. The activities are then stored in each student's electronic portfolio. Students will carry with them a paper booklet for GP teachers to complete that the student then uploads.

We are also looking to have more engagement with our GP teachers. You may have already had a practice visit from one of our staff or attended a teaching workshop. This year we are planning to continue webinar-based training and our practice engagement has been enhanced by a growing team of experienced GPs able to visit more of you in your practice environment. In 2020 we changed the processes around providing feedback from students to our GP teachers, which guides the support delivered to you by our practice engagement team.

Finally, the most important point to make is what hasn't changed. We still have keen students who need to learn about General Practice from great role models, seeing real patients, and learn from great GP teachers. Thanks for being a part of this for our future doctors.

2021 Year 3 Cohort

Please note that students experienced an interruption to clinical placement in 2020 and as such may seem less confident in the clinical environment compared to previous years.

2. Background information about The University of Queensland's Medical Program

The University of Queensland's 4-year post-graduate MBBS medical program was introduced in 1997. The program moved to a MD degree in 2015, with the first cohort of MD students undertaking GP placements in 2017. A restructure of the faculty has occurred and the new name being the Faculty of Medicine, with the medical program being directed from the faculty level rather than sitting as a separate school.

Detailed information about the MD program can be found by going to the Faculty of Medicine's website: www.medicine.uq.edu.au and clicking on "Current Students – Program, Policies, Curriculum". Principles upon which the design of the MD program is based include an emphasis on:

- Case-based learning in a clinical context;
- Self-directed, life-long learning;
- Critical evaluation of the scientific basis of medicine;
- Integration of basic and clinical sciences;
- Bio-psychosocial approach to medicine; and
- Personal and professional development.

Key features of the program include:

- an emphasis on the teaching of communication skills and the
- incorporation of ethics and professional development as an integral part of the curriculum.

The curriculum has been planned to capture the enthusiasm and maturity of its graduate entrants and help them develop into highly-skilled medical graduates capable of entering the wide variety of career options open to them worldwide.

Years 3 and 4 of the MD are known as Phase 2 of the program and are largely spent doing clinical placements. These placements occur in a range of locations in and around Brisbane, regional and rural locations in Queensland, New Orleans and Canada. General Practice is a 6 week course along with Mental Health, and Rural and Remote Medicine/Medicine in Society in an 18-week semester, in Year 3.

3. General Information about the General Practice Course

The General Practice Course affords students the opportunity to see and participate in the delivery of primary health care to patients with a large range of biopsychosocial problems. Additionally, through exploring the community context of health and illness, students will learn about people's experiences and everyday management of health and health problems.

The course encourages students to become active learners in their assigned practices and, under the supervision of their general practitioner (GP) clinical teachers, to conduct as many components of the consultation as practical and as agreed upon with their GP clinical teachers. This includes history taking, physical examination, developing management plans, surgery tests and minor procedures. Students are encouraged to be enthusiastic and inquisitive, to become familiar with the everyday procedures involved in the workings of the general practice, and to function as a member of the healthcare team. Students are expected to use evidence-based medicine skills to answer clinical questions as they arise, thus providing a benefit to their GP as well as to their own learning. Additionally, students are requested to work up illustrative cases to contribute at weekly small group, case-based tutorials. They are also advised to be polite and punctual at all times, and to ensure that they always observe patient confidentiality.

The General Practice Course should provide for students:

- Learning about the discipline of general practice;
- Learning about primary care and its community context;
- Access to a broad spectrum of clinical problems over the typical range of general practice work;
- Learning by active involvement in the diagnosis and management of common and important problems presenting in general practice; and
- Learning a critical attitude towards the assessment of clinical problems, evidence, and the role of primary care practitioners.

Student Learning Objectives

By the end of the Course, students should be able to:

1. Demonstrate knowledge of the epidemiology, pathophysiology, clinical features and management of (a) *common*, and (b) *serious / important presentations* in general practice;
2. Demonstrate competency in the clinical skills required to diagnose and manage patient presentations in general practice (i.e. communication skills, history-taking, physical examination, ordering and interpreting relevant office and laboratory investigations, and performing minor procedures);
3. Demonstrate competency in clinical reasoning and the ability to formulate a diagnosis (and/or differential diagnosis) and problem list, for patients presenting in general practice;
4. Demonstrate competency in developing management plans with patients and carers presenting in general practice;

5. Demonstrate an understanding of factors influencing a patient's experience of illness and health;
6. Demonstrate competency in recognizing and appropriately negotiating relevant ethical and professional issues which arise in clinical and collegiate/professional encounters;
7. Demonstrate competency in incorporating prevention and health promotion into clinical encounters where appropriate;
8. Demonstrate competency in incorporating evidence-based medicine into clinical encounters where appropriate; and
9. Demonstrate a sound understanding of the role and responsibilities of general practitioners in the Australian health care system.

4. Guidelines for GP Clinical Teachers

- Please be positive about general practice! Students are more likely to consider general practice as a career if they meet positive role models, and identify the intellectual challenges of our specialty.
- Please do not provide clinical care to your student while they are on placement with you (except for emergency care). This is to keep the boundary between teacher/examiner and personal clinician clear. Being their personal GP may make it difficult for you to assess them. For reasons of both confidentiality and boundaries, we ask students not to seek placements in practices in which they or a close relative is either employed or a patient.
- Kindly facilitate students participating in consultations and supervised home visits to learn about general practice problems.
- Involve students in interviewing and examining patients
The students are keen to take as many opportunities as possible to interview patients prior to, during, or after your consultation with them. We suggest that students interview at least one patient per session, and present patient histories to you at a convenient time. This may be when you join the patient and the student to complete the consultation. The students also need to gain experience in performing clinical examinations. Consider giving students a small task to complete, for example checking that the patient's smoking status is recorded, or examining the rhythm of the pulse, in most consultations.
- Provide opportunities for students to undertake common GP procedures including:
 - Performance and interpretation of ECG recordings
 - Use of peak flow meter and spirometer
 - Urine dip stick testing and pregnancy testing
 - Use of glucometer
 - Measuring vital signs
 - Venesection
 - Giving injections
 - Infiltration of local anaesthetic
 - Suturing wounds and simple excisions of skin lesions
 - Demonstrating use of MDI puffers and spacer devices
 - Set up and use a nebuliser
 - Ophthalmoscopy and otoscopy
 - Vision testing
 - Baby measurements e.g. length, weight and head circumference
 - Use of cardiovascular disease risk calculators.
 - Use of patient information material
 - Use of chronic disease management plans and mental health plans
 - Use of recall systems and other preventive health tools
- Please arrange times for your student to discuss with you clinical and ethical issues arising in your teaching consultations. Typical ethical or professional issues which students raise in their tutorials include:
 - Confidentiality (contact tracing, relatives' enquiries, requests for medical records etc.)
 - Difficult patients (angry, mental health issues, special needs, heart-sink, non-concordant etc.)
 - Complex consultations (interpreter present, relative present etc.)

- Referrals and investigations (thresholds for referring to another specialist or investigating patients etc)
- Colleagues (treating colleagues, error, clinical disagreement etc)
- Alternative/complementary approaches including to vaccination
- Drug-seeking patients
- Certificates
- GP remuneration (long consultations, fees etc)
- Navigating the health system (waiting lists, private insurance etc)
- Boundaries (accepting gifts, treating family and friends etc)
- Self-care
- Career and training decisions

You may like to discuss some of these issues with your students.

- Facilitate the acquisition of knowledge of common and important conditions encountered in general practice
- Encourage the use of evidence.
The students have been taught to search for evidence and to appraise what they have found. Encourage them to do this. For example, if a case does not have a clear treatment available, ask them to search the literature for you and report back to you about their findings.
- Please provide students with an opportunity to talk with other practice staff about issues relating to practice management
- We suggest that you ask students to develop their own management plans for your patients and present them to you
- **Consider supervising students with the following additional tasks:**
 - Notify an adverse drug reaction to ADRAC using the form available at:
<https://www.tga.gov.au/reporting-adverse-events>
 - Perform an assessment on a patient (e.g. a mini mental state examination)
 - Draft a certificate or referral letter for a patient.
 - Update a patient's current medication record.
 - Perform a travel medicine plan e.g. vaccinations required, medication and patient education & advice.
 - Check the Medicare Benefits Schedule for the correct item number and definition for a procedure undertaken on a patient.
 - Collect and record the complete medical and social history for a patient new to the practice, including allergies, medications etc.
 - Locate and apply an evidence-based guideline to the management of a patient seen in general practice.
 - Record consultation notes in a patient's medical record.

SPECIFIC WEEKLY TASKS:

WEEK 1:

- We ask that you meet with your student at the beginning of the Course to introduce the student to your GP clinical teachers, and to your practice staff, policies and procedures.
- We recommend that you ask your student to complete a confidentiality agreement form – which is provided to you at the commencement of the course.
- Arrange mutually convenient times for the student's GP sessions.
- Discuss the student's learning contract with him/her. Each student has been asked to develop a learning contract for the course, in which he/she documents specific learning objectives they would like to achieve. Students are to discuss this learning contract with you in Week 1, and then throughout the course on a regular basis.
- Please schedule a time and date to meet with your student in Week 3 to complete and provide feedback based on the mid-term assessment and again in Week 6 to complete and provide feedback based on the end-of-term assessment form (based on the "Clinical Participation Assessment" marking sheet found in the student's Workplace-based Activity Logbook). However, please note the Clinical Participation Assessments (CPAs) are completed via an electronic assessment system, Chalk and Wire. **For guidance on how to access the assessment and complete this online, please refer to page 15: [CPA Process](#).**

When several GPs at a practice have contributed to the student's teaching and learning, it is advisable for the same GP clinical teacher to perform both assessments, and to seek input from his or her clinical teacher colleagues before completing the assessments electronically.

WEEK 3 - MID-PLACEMENT:

- Undertake a mid-term review with your student and complete the mid-term Clinical Participation Assessment (CPA). Please discuss your comments directly with the student and suggest strategies to improve upon any areas of weakness.

WEEK 6 – END-OF-PLACEMENT:

- Undertake the end-of-term review with your student and complete the end-of-term CPA. Please provide constructive feedback to your student when discussing your assessment and comments.

Please contact Course Coordinator, Dr David King d.king@uq.edu.au if you have concerns which need addressing about a student. Please do so without undue delay at any stage during the block (including to discuss any borderline or unsatisfactory assessments in either CPA). Alternatively, phone the Course Administrator on 3365 5260 or email via med.gp@uq.edu.au

5. Supervision, consent, confidentiality and other issues relating to student placements in General Practice

Supervision of Students

Our students enjoy developing their consultation and physical examination skills under your guidance, and being taught procedural skills such as injections and excisions. We encourage you to afford them as many opportunities as practical, within the business and busyness of your general practice. Of course, as the general practitioner you have the direct and principle responsibility for the patient:

“The student should consult the supervisor about the management of all patients”¹;
“The ultimate management of the patient should be provided by the supervisor”¹.

We strongly recommend that you “be physically present at the workplace at all times whilst the student is providing clinical care”¹. If you are absent “doctors with general or full unconditional registration should oversee the student.”¹ Students should only go on home visits to patients with the supervisor present, and “may elicit histories and examine patients in their homes only under direct supervision”.¹

In many practices, other practice staff members, especially practice managers and nurses, assist in teaching your medical students. Students often regard this teaching as very beneficial.

Patient Consent

Consent must be obtained from your patient for the student to participate in their consultation with you.

“The permission of the patient must be obtained prior to the consultation if undergraduate students are to be involved in the consultation, whether through direct observation, interview or examination. Ideally, permission needs to be sought when the patient makes an appointment, or failing that, when they arrive at reception. It is not acceptable to ask permission in the consulting room, as some patients may feel ‘ambushed’ and unable to refuse.”¹

We commend the common practice of displaying a sign introducing the student in your waiting room. (A sign is included in this mail-out for you to use if you do not already have one.) When your patients arrive at the surgery, we recommend having the receptionist:

- a. ask your patients if they are happy for a medical student to be involved in the consultation; and
- b. communicate each patient’s response to you PRIOR to the patient being called into the consultation room.

In this way, the student can be requested to leave the room BEFORE you call in any patients who prefer not to have a student present.

An alternative process is to have the student seek consent in the waiting room from the patient for student participation in the consultation.

Our practice visits indicate that most teaching practices report that over 90% patients agree to see medical students.

While written consent from patients might be ideal, we do not see that this is practical, although some practices do ask new patients, at the time of their registration at the practice, to indicate on a written form whether they consent to medical student teaching in their consultations. It is advisable for consent to be documented in patient records.

Patient Confidentiality

Students should sign a Patient Confidentiality document with you. Students are aware that there are very serious penalties if they breach patient confidentiality. A suggested proforma is attached. Students should also be aware of your practice's Privacy Policy.

Student Cover

Medical students are insured by The University of Queensland for the duration of the approved course, but not for any extra sessions with your practice outside of their GP Course. Your student must obtain approval from the Primary Care Clinical Unit before starting any such extra sessions. Please also note that if the student receives any payment from your practice during their attachment, their status changes to an employee and the University policy does not cover them.

GP Teacher Medico-legal Cover

Please confirm with your Medical Defence Organisation your cover for healthcare incidents where the healthcare is provided by someone you are observing, supervising, mentoring or teaching. It is our understanding that complaints relating to medical students in general practices are extremely uncommon.

Your responsibility to notify the University

Please note that it is your responsibility to notify the University immediately should any criminal charges be placed upon you or should any conditions or cancellation occur to your AHPRA Registration. You must notify us if you have been charged with or found guilty of any criminal offence which is relevant to your ability to perform the inherent requirements of this position, or have engaged in, or to your knowledge have been investigated for, any other behaviour that would be incompatible with the position or which may adversely affect the University's reputation if subsequently disclosed.

Student competence

Some GPs have asked us to provide information regarding the level of competence to expect from medical students undertaking their General Practice Course. All students participating in the General Practice Course have completed at least two years of medical education, most at the University of Queensland Medical School. They have been exposed to problem-based learning in normal structure and function, and pathology; to lectures and seminars; and to clinical coaching tutorials, including sessions with a female clinical teaching associate who assist them to conduct a pelvic examination, PAP smear and breast check, and a male clinical teaching associate who assists them to conduct a testicular and digital rectal examination. Students who completed their first two years of medical education at other Universities, e.g. the University of Malaysia, will inevitably have had a somewhat different experience.

Students rotate in groups through the five third-year courses: mental health, general practice, medicine, rural/medicine in society and surgery. Needless to say, students undertaking their first course in 3rd year will inevitably have much less clinical experience than students undertaking their final course for 3rd year. Each week throughout the 6-week general practice clinical placement, students meet for a 2 - 3 hour case-based tutorial facilitated by a practising GP (in which they review de-identified cases of interest from their week in general practice, discuss ethical and professional issues which have arisen, and practise their consultation skills).

As a general rule, we suggest that all students should be competent to assist with the history-taking and examination of your patients, and to be taught basic procedural skills such as performing ECGs, spirometry, immunisations, simple excisions and biopsies, under your supervision.

PIP Payment for Teaching

If your practice is accredited and you are registered with the Practice Incentive Program (PIP), you are eligible to apply for teaching payments from the Medicare Australia PIP teaching incentives Program. Payments are \$200 per half-day teaching session (with a maximum of 2 sessions per day, and 1 student claimed per session/GP).

PROPOSED SAMPLE CONFIDENTIALITY AGREEMENT FOR MEDICAL STUDENTS TO SIGN

Adapted from RACGP agreement available at:

<http://www.racgp.org.au/Content/NavigationMenu/PracticeSupport/Privacy/Generalpracticepolicy/20030206staffconfidentiality.doc>

(This sample draft undertaking may be used by GPs to ensure that practice staff and other persons working in this practice who may have access to confidential patient data or other business information, comply with privacy and security of information as required under legislation, including the Privacy Act 1988 (amended)).

I, *(student name)* _____

understand that as a condition of placement during my General Practice course at this General Practice: *(name and address of doctor / medical centre)*

I shall, neither during nor after the period of engagement with the practice, except in the proper course of my duties or as permitted by the practice or as required by law, divulge to any person any confidential information concerning:

- patient personal, health and financial information;
- the business or financial arrangements or position of this practice or any related company; and
- any of the dealings, transactions or affairs of the practice or any related company.

The contractual arrangement between this practice and its employees/contractors is founded on trust. I undertake not to knowingly access any confidential information about the business of the practice, patients or patient medical information, unless such information is essential for me to properly and efficiently perform my duties. I am aware that these conditions extend to unnecessary discussion of confidential information within the practice. I understand that any breach of this trust will render me liable to disciplinary action, termination of placement and/or civil proceedings.

I further undertake to inform my supervisor immediately if I become aware of any breach of privacy or security relating to the information I access in the course of my duties.

This restriction ceases to apply to any information or knowledge, which subsequently comes into the public domain by way of authorised disclosure.

All confidential records, documents and other papers together with any copies or extracts thereof in my possession will be returned to the practice on the termination of my employment.

Signature: _____

Date: _____

In the presence of:

(name)

(signature)

(position)

6. Components of the General Practice Course

Scheduled Components of the Course

The Course is structured to allow students to have exposure to several different avenues of learning. The components of the course are as follows:

1. Regular attendance at a general practitioner's practice

GP clinical teachers are asked to provide students with 32-36 half-day sessions during the 6-week clinical placement (minimum of 28) with each session usually somewhere between 3 and 5 hours duration. Days and times of sessions are negotiated between individual students and their clinical teachers.

It is the expectation of the Primary Care Clinical Unit that sessions will be spread evenly over the Course UNLESS this is not convenient for the teaching practice. *Please advise us if a student is asking not to attend in all 6 weeks.*

Students who are keen to attend additional sessions during the Course are advised that this must be negotiated with their GP teachers, and that some GPs may be unable to provide additional contact time.

In 2020, students are asked to return to the University every second Wednesday for teaching in both lecture and tutorial formats. Other learning materials are delivered in Voice-Over Powerpoint or other formats online, and are made available to students for personal study. We are happy to provide these online materials to our GP Clinical Teachers. Please email Dr David King d.king@uq.edu.au if you would like to receive these on a USB stick.

2. Regular attendance at Case-based tutorials

There are six scheduled Case-Based tutorials. Each week has a designated a "theme" and students are asked to present clinical cases during these tutorials based on patients they have seen in general practice.

WEEKLY THEMES

- Week 1 - Cardiovascular and Respiratory
- Week 2 – Women's and Men's Health, Sexual Health
- Week 3 – Mental Health, Fatigue and Musculoskeletal health.
- Week 4 – Endocrine & Metabolic conditions, and Skin
- Week 5 – GIT, Aged and Palliative Care, Pain Management
- Week 6 – Emergencies in General Practice, Paediatrics & Headache

Attendance at the above sessions is compulsory.

3. Online resources

A selection of learning materials and other resources are provided to students at the beginning of each course. These resources are provided on a GP Course Blackboard site.

7. Assessment in the GP Course

There are four assessment components for the General Practice Course.

1. Multiple Choice Question (MCQ) Examination
2. A role-played clinical case assessment
3. In-tutorial assessment
4. Clinical Participation Assessment (CPA)

Attendance

In addition to the above, satisfactory attendance at the designated core curricular activities (GP visits and Case-based Tutorials) is a requirement for passing the course.

GP Clinical Teachers are requested to complete two CPAs during the GP placement:

1. Mid-placement – week 3
2. End-of-placement in Week 6 of the clinical placement

CPA Process

Students submit their CPAs online via the electronic assessment system called Chalk and Wire Portfolio Assessment.

You will receive an email with the subject heading 'Work to Assess from UQePortfolio' to the email address which is registered with the Primary Care Clinical Unit (typically the practice manager's address). This email contains a link to access the assessment.

The main GP teacher can log in and complete the assessment using the registered email address as the login.

Further instructions are available here: [Quick Start Guide for External Assessors - eLearning - University of Queensland \(uq.edu.au\)](#)

We ask clinical teachers to discuss these assessments with their students and provide constructive feedback to students when completing their mid-placement and end-of-placement CPAs.

When several GPs at a practice have contributed to the student's teaching and learning, it is advisable for the same GP clinical teacher to perform both assessments, and to seek input from his or her clinical teacher colleagues before completing the assessment.

Please contact Course Coordinator, Dr David King d.king@uq.edu.au if you have concerns about a student which need addressing without undue delay (including borderline or unsatisfactory assessments in either CPA). Alternatively, phone the Course Administrator on 3365 5260 or email via med.gp@uq.edu.au

8. Student Exposure to Blood and Body Fluids

Students are encouraged to inform you and/or your practice staff in the event of any exposure to blood or body fluids.

Thank you kindly for taking care of the student and managing this event as per your practice policies. The

RACGP Infection Prevention and Control Standards include the following summary:

Management of an occupational exposure ensures:

- immediate decontamination of the exposed area
- rapid testing of the exposed person and the source
- timely administration of Post Exposure Prophylaxis when appropriate
- full documentation of the incident to enable investigation
- counselling of the exposed person and source
- analysis of the cause of the exposure incident and modification of procedures as required to reduce the risk of recurrence
- staff education as required.

We also recommend the Queensland Health **Guideline for the management of occupational exposure to blood and body fluids**, available online at <https://www.health.qld.gov.au/qhpolicy/docs/gdl/gh-gdl-321-8.pdf>. This site is also recommended to students, and includes Queensland Health contacts for further information.

Thank you for contacting the Primary Care Clinical Unit in the event of any significant or high risk exposure: Course Administrator on 3365 5260, Dr David King d.king@uq.edu.au and A/Prof Katharine Wallis on k.wallis@uq.edu.au.

Contact details

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CRICOS Provider Number 00025B