Undergraduate Medical Education at Central Manchester Foundation Trust

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Hospital Dean

CMFT Medical Educators Conference
November 2015
Undergraduate Medical Education

• What do we teach our students?
• How can you help teach them?
• How is the curriculum changing?
One of the largest teaching hospitals in Europe
Undergraduate Medical Education

Manchester University – 30th in World University Rankings

Manchester Medical School – overall student satisfaction (2015) 85% - up from 70%

CMFT average finals OSCE mark = 5.10

(range 1-7, pass = 4.0, Med School average = 4.97)
What do we teach our students?
The Manchester Curriculum

Foundation years - Starting a career

Phase 3 (Y5)
Consolidation - preparation for practice
Teaching Hospitals & DGH; Community Electives; Portfolio

Phase 2 (Y3+4)
Developing clinical competence
Y4
Mind and Movement
Families & Children
Portfolio; Project Option

Y3
Introduction to Clinical Learning (ICL)
Heart, Lungs & Blood
Nutrition, Metabolism & Excretion

Phase 1 (Y1+2) Laying foundations
Essential Skills – Sem 1
Life cycle (including ECE) – Sem 1
Cardio/Resp (including ECE) - Sem 2
Mind and Movement – Sem 3
Nutrition & Metabolism - Sem 4
1990 curriculum

- Lots of basic sciences
- Lectures
- Multiple attempts at inserting venflons
- No teaching on prescribing/communication

- Essays
- Short cases
2015 curriculum

- PBL
- Student selected components
- Community based education
- Communication skills teaching
- Skills lab teaching
- OSCEs
- UPSAs
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• **Year 3**: 130 students in clinical pairs, 20 firms, based at MRI or NMGH, 1 day a week in community

• **Year 4**: 130 students, based at MRI, Salford and Park House (M&M) or SMH, RMCH, Tameside, Oldham and NMGH (F&C), 1 day a week in community

• **Year 5**: 130 students, 8 blocks of 4 weeks each
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Year 3

- Introduction to Clinical Learning (3 weeks)
- Groups of 6-8 students (3-4 x clinical partners) in 4 blocks of 7 weeks
- 2 x PEP (4 weeks each)
- Supplemented by PBL and sessions in skills lab and communications
- Portfolio
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Year 3

20 clinical firms distributed across the specialties:

- Acute medicine (A&E, MAU, Cardiology, Respiratory)
- Specialist medicine (e.g. renal, haematology, cardiology, gastroenterology)
- Surgery (general, vascular, transplant)
- Clinical support services (anaesthetics, radiology, pathology)
- NMGH
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Year 4
Mind and Movement
Orthopaedics and Rheumatology at MRI and Trafford
Neurology at Salford and MRI
Psychiatry at Park House
Families and Children
Paediatrics at RMCH, Tameside, Oldham and NMGH
O&G at SMH Tameside, Oldham and NMGH
Project option – 11 weeks
Years 3&4 placement standards

• Induction on first day
• 3 timetabled teaching sessions per week - taught by ST1 or above
• 1 PBL – trained tutor, no more than 1 deputy tutor
• With community day, 60% of time in patient contact
• Students should take 3 histories per week and present 1 to a doctor
• Formal feedback at end of placement
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Year 4

New Specialty Blocks
(replaced SSCs in August 2014)

• Ophthalmology (M&M at MREH)
• ENT (M&M at MRI)
• Geriatrics (M&M at MRI, Trafford and Comm)
• Breast (F&C at UHSM)
• Dermatology (F&C at Salford)
• Infectious disease (F&C at NMGH and UHSM)
• Public health (F&C at Stopford Building)
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Year 5
Pre-exempting Exam – 4x4 week placements

- Teaching Hospital: MRI, NMGH
- District Hospital: Tameside, Oldham, Wrexham, Glan Clywd, Nobles (IOM)
- Community: GP, paeds, psych
- OSS: oncology (Christie), simulation, (prescribing) skills
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Year 5

Post-exempting Exam

- Student Assistantship: 4 weeks
- Clinical placement: 4 weeks
- StEP (subject to endorsement placement: elective): 2 x 4 weeks
- Portfolio
- uPSAs (undergraduate practical skills assessments)
- uCMD (undergraduate clinical management discussion)
- uCEX (undergraduate clinical examinations)
Year 5 Placement Standards

• Formal induction
• Weekly timetable
• 2 sessions per week of programmed teaching
• 7-8 sessions per week spent in clinical areas
• 3 formal meetings with supervisor
What is the syllabus?

• The syllabus is covered by the Intended Learning Outcomes of the PBL cases
• These are available on Medlea, in PBL tutors’ handbooks and via the MMS Curriculum Mapping Tool (available online)
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Hospital Dean supported by Associate Hospital Deans

AHD Student Welfare & Professionalism
AHD Curriculum Quality & Performance
AHD Feedback & Year 5 Programme Lead

AHD Specialist Medicine
AHD Acute Medicine
AHD Surgery
AHD CSS Division
AHD St Mary’s Division
AHD Childrens’ Division
AHD Royal Eye Hospital Division
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Administration
Head of Undergraduate Education (+deputy)
Year Leads
SWAP
OSCE
Portfolio/Academic Advisors
Clinical Skills
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Clinical Skills

Introduction to clinical learning (Y3)
Frequent timetabled sessions through Y3
Tailored Y4 teaching (M&M, F&C)
Simulation sessions, especially Y5
OSCE preparation

Innovation
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Student Welfare and Professionalism (SWAP)
Help 25-30% of students
Transfer of Information (ToI) from Phase 1 and St Andrew’s
Identification of issues requiring support, especially health
Monitoring of conduct and professionalism
Liaison with MMS at Stopford Building
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Personal Excellence Paths (PEP)

• Wide range of PEP and Applied PEP placements in CMFT, including pan-sector options in specialist areas

• PEPs recent change from SSCs: now related to quality improvement/clinical governance

• Leading research centre with opportunities for excellence
Portfolio

- All students allocated an Academic Advisor from CMFT
- Formative reviews in Y3 and first Y4
- Summative review at end of Y4 (progression issue)
- Training provided
Potential teaching roles

- Placement lead (2 hrs/week)
- Placement tutor (1 hr/week)
- PBL tutor (2 hrs/week)
- PEP/Project option supervisor
- OSCE examiner (1-2 days/year)
- Communication skills tutor
- Academic advisor
- Associate Hospital Dean
Drivers for change

• Specialties Block
• Placement standards for Phase 3
• Revised curriculum from MMS from September 2016 (see IMcI later)
• Department of Health costing exercise
• Commissioning by CMFT to Divisions and MMS to sectors
• Loss of SIFT income to the Trust
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Teaching Service Level Agreements

• Response to MPET review with serial reduction in funding to CMFT
• Allocation of funding to individual divisions
• Baseline calculations of activities: clinical firms, bedside teaching, PBL, OSCE, comms skills, PEPs, POs, AA
• Based on student week: £34k/42 = £850
• NB same for all hospitals; recharge being negotiated for ‘teaching hospital’ roles such as exams, skills, student support: not yet agreed, so still losing funding
• QA process to monitor activity
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Teaching Service Level Agreements

- Increased activity should result in increased funding (and vice versa)
- Potential for CMFT to increase income through PEPs and APEPs and some Year 4 specialty blocks
- Threat to income from community, district hospitals (particularly Pennine) and other Year 4 specialty blocks
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GMC and Accreditation of Undergraduate Trainers

• From 2016, all those involved in undergraduate education must demonstrate their training is appropriate and up to date (similar to the current situation for postgraduate trainers)

• Equiniti (and any successor) is being modified to recognise UG activities such as PBL, OSCE, comms skills and AA

• Those signed off at PG level as ES/CS will be recognised equally at UG level as firm leads

• MMS also require sign off on their e-learning module for clinical tutors (unique to MMS)
We do our best to help students become good and happy doctors
Hello, Dad-
Just a little note to let you know how loved you are.
You’re a great leader and a wonderful role model!
Hello, Dad—

Just a little note
to let you know
how loved you are.
You’re a great
leader and a
wonderful role model!

Dear Dad,

(if you think of some little way
to reward this kind of loyalty,
just go with it.)

Hope you like the card!

Happy birthday with
lots of love!

Manchester Medical School
educating, training and preparing our students for practice
Undergraduate Web site
www.cmft.nhs.uk/undergrad
ANY QUESTIONS?