

## Preparation for Practice Teaching Programme

### What problem was addressed

There is evidence that Medical schools programmes may not adequately prepare students for work as doctors.(1) The UK GMC has pushed for better preparation. We describe a campus-based teaching programme, delivered at University College London, which aims to prepare 4<sup>th</sup> year students for practice across community & hospital settings.

### What was tried

“Preparation for Practice” is a week-long programme that started in 2012. In the first session students encounter four clinical patient-based scenarios in a general practice setting. During the week all four patients require a hospital admission. The cases include a young person with meningitis, a middle-aged person at high risk of diabetes who has an MI, an older person with pneumonia and a young person with depression who takes an overdose. In these cases, the students gain experience in history taking, making a diagnosis, assessing risk, and referring unwell patients to hospital.

The students follow the patients’ journeys through hospital where they cover Advance Life Support, handover, prescribing, and writing discharge summaries. In the final session, the patients have been discharged and the students review them back in the community. Here they engage in issues such as continuity of care, risk prevention, fit notes (Med3), complaints and discussions around “Do not attempt resuscitation” decisions (DNAR).

The programme is multidisciplinary and taught by GPs (and trainees), pharmacists, librarians, simulated patients and acute medical trainees. Sessions include role play, interactive sessions, self-directed learning and practical skills teaching. Questionnaires are used to evaluate each GP led session with free text questions and Likert scales at the end of each term to evaluate the week as a whole.

### What lessons were learnt

Almost 100% of students provide feedback after each GP led session, allowing us to continually improve the programme. We are also able to identify which elements of the course students’ value most. In particular, almost all students commented positively about the role-play with the simulated patient. This included explaining DNAR and taking a depression history, providing them with an introduction to communication in difficult situations. Many specifically mentioned it was realistic and that it was a good experience allowing them to practice communication skills.

We have also overcome challenges. Previously it was hard recruiting GPs to teach the primary care components of the programme, negatively impacting the students’ experience. However, this has significantly improved after receiving more administrative support and using GP trainees with an interest in teaching to deliver the sessions.

In the most recent term students rated the course highly; 81% rated it as above average, good or excellent. Many students mentioned it was interactive, useful, reflective, interactive and well structured. Some mentioned it was useful for their exams but also future work as a doctor.

This teaching week provides skills in communication, prevention and the management of acute and long-term conditions. It also exposes medical students to important aspects of working as a junior doctor in both community and hospital settings. Thus, preparing them for clinical practice.

1. Cameron A, Millar J, Szmidt N, et al. Can new doctors be prepared for practice? A review. *The Clinical Teacher*. 2014;11(3):188-92.