

5/2020

Primary Health Care  
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@capcteaching

## Teaching Newsletter

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### General Practice in the Age of Covid

from Professor Trevor Thompson, Head of Primary Care teaching

Bristol - a city with a village feel. I buy vegetables from the same small shops, dry foodstuff from a lone trader and the guy in the local hardware store is on our Christmas Card list. Regular face-to-face contact with these retailers, having a bit of banter, being recognised in the



social space, adds significantly to my quality of life. Compare this with the experience of finally getting through to someone in customer services in your bank, internet provider or utility company. The operative might be competent but the transaction tends to sterility in the human sense. I had one of my easier days in General Practice yesterday. All telephone consultations, some complex, many simple. I ran exactly to time and for the first time in maybe ten years

left the practice before 6pm. But easier is not necessarily better. As my Senior Partner said, by text of course, "I wouldn't have signed up to a career of this sort of work". Obviously this is a phase, albeit a potentially long one, but I feel unease as we move our interactions to phone and computer. Unease for patients, students and ourselves. For instance, the thing that makes GP zing for our students is meeting patients, examining them and seeing important decisions unfold real-time. They feel part of the caring enterprise – even to the point of having their "own" patients. The feedback we've had from students from GP placements this year has been truly stunning.

Here in "CAPC Teaching" we are turning our attention to what is going to happen from September 2020. The crystal ball would suggest lockdown will have eased but social distancing (especially around healthcare settings) will still be in place. We're wondering if we, as GPs, will be considerably busier than at present as those who've stayed away come back. With this uncertainty in mind we are planning our 2020-21 recruitment as "Plan A" and "Plan B". Plan A is a continuation of our current exceptional circumstances with no students physically present in practices. We'll be asking you to conduct Zoom/Skype-style tutorials in a variety of formats including "simulated surgeries" and "live patient interviews" (patients could potentially do this from home). We'll do all we can to create engaging materials that challenge students to think and interact. Plan B involves the students back in our practices with business as near-usual. We imagine there will be more telephone triage and video-consulting and we'll be creating materials to help you help students improve their skills in these domains. Plan A and Plan B will follow the same curriculum so the transition from one to the other shouldn't be too clunky. We are aiming for equitable payments over the two options. My sincere hope is that we will find ways to maintain the image of General Practice as a place of meaningful clinical relationship to inspire the next generation of practitioners. Keep an eye out for those recruitment emails!

**Please welcome new members of the Primary Care teaching team p2**

Read how **medical student teaching moved online p2-4**

CAPC blog on **grieving in the Covid pandemic p3**

**Domestic violence** and the pandemic p3

Prof. Feder's reflections on **reading 'The plague' in the middle of a pandemic p3**

**GPs in training as Balint Group facilitators p5**

5/2020

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## Please welcome our new Primary Care teaching team members

### **Dr. Kimberly Bruce**

Kimberly joined the primary care teaching team as a Clinical Lecturer in January 2020. She is developing the new Year 4 GP attachments for MB21. She also teaches medical students in Practice and is a small group tutor for consulting skills.

Kimberly is a salaried GP at Pioneer Medical Group with interests in women's health and contraception. Outside medicine she enjoys playing the ukulele, weight lifting, open water swimming and spending time with her children.

### **Amanda Gardham**

We are pleased to announce that we have a new, full-time member of our admin team. Amanda Gardham joined us in April and is getting to grips with the challenges of working from home and communicating via Skype! She will primarily focus on Years 4 and 5 and her email address is [phc-teaching@bristol.ac.uk](mailto:phc-teaching@bristol.ac.uk).

## Moving medical education online

### **Year 1 from Juliet Brown**

In year 1 half of our GP tutors were expecting students on March 20th. All of a sudden, on March 19th..... face-to-face teaching ceased with immediate effect. Students went home, lecture theatres were empty, and tutorial rooms were unoccupied. The central teaching team spent most of the Easter period moving material online. Students 'came back' to university in April to a course delivered wholly by remote means. Their Year 1 Effective Consulting (EC) tutorials saw our EC tutors donning wigs and roping in household members to play to role of patients enabling students to practice communication skills remotely. The students turned up in force online despite disparate time zones. One group had two international students: one in Canada, the other in Taiwan! I suspect this cohort will be well prepared for the challenges of consulting via video and phone in the future. Clinical Contact for Year 1 students has been "replaced" by online material including the observation of a GP consultation from our very own Horfield surgery in a clip from GP: Behind Closed Doors.

The MB21 course structure of case based learning means we have a cohort of students who are well prepared for self directed study but they have certainly enjoyed seeing their tutor groups and peers. The students have also worked hard producing creative pieces based on their Year 1 Clinical Contact. As you know this is something we do every year, but this year it has been an especially useful outlet for our students. Thank you for all that you and your patients have shared with them over the last few months.

We continue to work hard to plan for the future of our new incoming medics in September 2020 and will look forward to the resumption of face to face teaching both on campus and in clinical practice as and when possible

## Moving medical education online

### Year 2 from Jess Buchan

In Year 2, students would normally have been coming out to primary or secondary care once a fortnight to learn consultation skills, and perform clinical examinations and clinical skills. They would also normally meet with their "*Effective Consulting*" group where they practise different clinical scenarios with each other and with an actor. As for all of us, it was a shock when the announcement came that face to face teaching must end and those that could, should return home. In the midst of a lecture I found myself saying goodbye, and we all wondered what the coming weeks would hold. In a matter of days university buildings closed and working was entirely remote. From lectures with 270 students filing in, we are now delivering live Year 2 lectures over a platform called "Blackboard collaborate." a way of presenting slides or drawing on a whiteboard to your audience, with a video of the presenter, a polling system for voting and a chat function for students to ask questions. Some things stay the same; a few keen students enter the online room early, then the majority arrive in the nick of time, with the usual cohort of stragglers. Of course, due to the different time zones some students are joining us from their middle of the night so you have to be somewhat forgiving of latecomers. We have made lots of pre-recorded lectures available, and students are working through self-directed material. It's tricky to replace actually seeing patients but they are watching videos of patient consultations, and still get to practise with an actor. We've rewritten the scenarios for the actor to be consulting with the GP practice via video link--good training for the future of remote consultations. Obviously the OSCE assessment is not possible right now, so we have developed an online remote knowledge based assessment.

If you taught Year 2 students and were due to have them in practice and have their contact details we are sure they would like to hear from you and what clinical practice is like for you in this pandemic. We also understand how busy you are right now and the students do not expect this but I know a few have expressed concern and good wishes for their clinical teachers.

### Grieving during the corona pandemic

<https://capcbristol.blogs.bristol.ac.uk/2020/04/20/how-coronavirus-has-transformed-the-grieving-process/>

### Domestic abuse and Covid

<https://safelives.org.uk/news-views/domestic-abuse-and-covid-19>

### Prof. Feder on reading 'The plague' during a pandemic

<https://capcbristol.blogs.bristol.ac.uk/2020/04/02/a-gp-reads-the-plague-during-the-covid-19-pandemic/>

5/2020

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## Moving medical education online

### Year 4 from Lucy Jenkins

You may be wondering what the year 4 students who were due to come to your practices are doing instead? After the rather sudden closure and imposed break from study, the course has resumed and last week they started a 7-week block of remote learning for which we have attempted to create an integrated timetable of learning for GP, Medicine for Older People and Dermatology. This includes review of pre-recorded lectures, self-study using textbooks and online resources.

The OSCE has been postponed and they are sitting a formative multiple choice exam from their homes.

They are using Speaking Clinically; a video archive of patients talking opening about their medical conditions to get the patients' perspective and are trying out remote small group learning.

We are encouraging role play consultations on willing household members and we are delivering consultation skills via conferencing software with an actor. The first of these was held last week. Eight students in various parts of the country and world, interruptions from dogs and Wi-Fi losses, but they each did a 10-minute role play with the actor, attempting a complete consultation around a core GP problem. Lots of learning and discussion about video consulting and we turned the videos off at times to experiment with telephone consulting. A great and valuable learning opportunity for the students who will become doctors in a health service possibly altered forever as a result of this pandemic.

I imagine that our day to day work in general practice may be different long after the pandemic is over and am thinking about how this will impact on our ability to deliver medical student teaching in year 4? The students so value the experiential learning from direct patient contact but opportunities for this will be less in the coming months, especially for this cohort if restrictions are ongoing or further lockdowns occur. So, we are looking at developing resources to help you to teach in different ways if needed, to engage the students with your new ways of working and to enable them to develop the skills they will need.

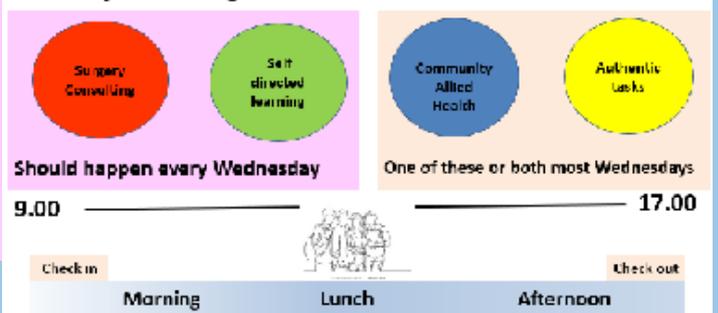
With that in mind, we hope to be in touch soon with details of the shortened 'catch-up' clinical placements we hope to offer in primary care and will, as ever, be grateful for your help and support with this. We hope that that the 7 weeks of remote learning will mean that the students are well prepared on the knowledge front and enthusiastic to get back to the patient facing process type learning in practice that is equally important. Thank you as ever.

### MB21 GP4

We will shortly be offering online workshops for MB21 Year 4. The information will be on our website and will be emailed to practices.

There is much uncertainty but we are hoping that some form of student placement may be possible from September.

### GP Day Building Blocks

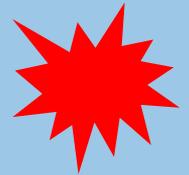


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**This is a unique opportunity for GPs in training to learn more about and to experience Balint groups. Please could you make sure that your GP Trainee (if you have one) sees this information.**



### **Opportunity for Severn GP ST2/3 trainees to co-lead Balint groups for medical students in year 4 CMOP University of Bristol from September 2020**

The Bristol psychiatry trainee-led medical student Balint group scheme has been running since 2012 giving hundreds of year 3 students an opportunity to be a Balint group member and psychiatry trainees the opportunity to develop expertise in Balint leadership. In September 2020 we are going to start running Balint groups for 4th year Medical students during their Care of the Elderly block. There will be an opportunity for you to be involved as a co-leader of a Balint group working alongside a Psychiatry trainee.

Balint group membership for medical students provides a space for students to discuss the student role in a clinical setting and the impact of clinical encounters including ethical dilemmas and aspects of professionalism. Students find it helpful to think about their role and experiences in a safe space with their peers and with an experienced doctor leading the group who is not in an assessment role. Those leading the groups have an opportunity to learn about Balint and Balint leadership, gain experience in group dynamics, learn about the student experience and become more sensitive to students' needs and concerns. They also have an opportunity to reflect on aspects of medical practice and the role of the doctor pertinent to all doctors at any stage.

For those GP trainees interested in becoming a Balint group co-leader we will arrange some Balint groups for you to learn about the Balint method provide training days, supervision and support. We are looking to recruit current ST2 GP trainees and less than full time ST3 trainees to train before August, who can then facilitate groups during the academic year starting in September 2020.

To register your interest in becoming a co-leader or if you would like any further information then please do contact me at the following email address:

[carolinequest@nhs.net](mailto:carolinequest@nhs.net) Dr Caroline Guest (ST4 in Old Age Psychiatry)  
Aspen ward, Callington Road Hospital, Bristol, BS4 5BJ

Tel: 0117 9195820