

Trainee guide to supporting Student Doctors on Placement

As trainees you can play a massive role in teaching student doctors and helping them to get the most from their placements. There's a huge amount that you can offer that the students can't get anywhere else, whether that is a closer understanding of where they're at or simply through enthusiasm and approachability. You know where the most useful experiences can be had and understand how to navigate what can be quite an intimidating environment for students.

Teaching is something that can be effectively done at any level and is usually a very rewarding experience, not just through satisfaction at a job well done but also the positive impact it can have on your own knowledge and learning. Nothing ensures your knowledge of a subject is bullet proof quite like teaching it!

A lot of us will remember placements in medical school that stood out as incredibly useful and enjoyable experiences and how much of a difference trainee doctors can make to that experience. We hope you will see quite how much you have to offer our students and have put together this guide to help you all get the most out of teaching.

Some useful resources:

There are a number of great resources that have been developed to help anyone interested in teaching to access useful information and support:

[Liverpool Educators Online \(LEO\)](#): (link)

This is an incredibly useful collection of information, resources, and tools to help with teaching medical students. It contains links to teaching guides, curriculum information, upcoming events, IT and teaching resources, support for educational supervisors and opportunities to get involved with teaching at the university.

You can find detailed information about the medical school programme structure and curriculum here:

<https://www.liverpool.ac.uk/medicine/liverpool-educators-online/curriculum/curriculum-overview/> (link)

[Faculty of Academic and Clinical Educators \(FACE\):](#) (link)

FACE is aimed at giving you opportunities to meet with colleagues from across the region, discuss new approaches to medical education and share news ideas and approaches. They provide a regular programme of CDP events across the year covering a wide range of topics including teaching techniques and assessment. These sessions are mapped to Academy of Medical Educators, GMC and HEA domains to allow you to develop your portfolio.

Membership is completely free and you can join here:

<https://liverpool.onlinesurveys.ac.uk/faculty-of-academic-and-clinical-educators-face> (link)

You can find a collection of recordings as well as slides on a host of past topics including teaching techniques, developing as an educator, and understanding students amongst many others here:

<https://www.liverpool.ac.uk/medicine/liverpool-educators-online/events/event-resources/face/> (link)

If you have any interest in developing as a teacher or being involved in teaching in the future then joining FACE is one of the most useful things you can do, even if you are early on in your career.

[Associate Clinical Teacher programme \(ACT\)](#) (link)

The school of medicine runs an Associate Clinical Teacher programme which is a great way to make your first steps into getting involved with teaching at the university. The programme involves an initial course on teaching methods followed by 5 or more half day teaching opportunities with observation and feedback. There is also the opportunity to get involved in an educational project under the guidance of a mentor.

Recruitment for the ACT programme begins in the Spring with a start date in September. To express interest in the programme or to find out more you can email teachmed@liverpool.ac.uk

You can find resources for the ACT programme here:

<https://www.liverpool.ac.uk/medicine/liverpool-educators-online/resources/act/> (link)

General Tips

- Get to know the students who are rotating through your area, introduce yourself and make them feel welcome, integrate them as part of the team
- Histories can be taken in pairs but should be presented solo
- For examinations (OE) the student needs to be observed performing the examination, not just tell you what they did
- In general, if you can observe them this is often more useful than them just reporting findings to you, you have a wealth of experience on technique to offer them
- Try to get them involved in a variety of activities depending on their level, rather than repeating the same tasks
- Prepare and plan sessions with the students
- Work to their level – consider their year and where their skills and knowledge should be at. A 3rd year student will not be at the level of an FI!
- Give constructive feedback – focus on what they did well and then discuss any things that could be improved

Guide to student years:

Here is a quick guide to the different student years you may encounter and an idea of what they are looking for in the placement.

Year 2

In year 2 our students start to be introduced to clinical medicine with 4 clinical weeks in secondary care. They are introduced to core clinical skills including taking a structured history using a template as a guide, examination of the cardiovascular, gastrointestinal, respiratory and neurological systems, venepuncture, SC and IM injections and taking an ECG. Required assessments include presenting histories, observed examinations and DOPS for clinical skills. They should be able to perform all the steps in a history and examination but will not necessarily be able to interpret findings.

Year 3

In year 3 our students spend the majority of their time in clinical placements.

These are:

- **Medicine** – Cardiovascular, Respiratory and Dermatology, Paediatrics, Gastroenterology, Diabetes and Infectious Diseases
- **Surgery** – Colorectal, Urology, Breast, Upper GI and Liver, Trauma & Orthopaedics and Vascular

- **GP, Paediatrics and Obstetrics & Gynaecology**

Students continue to develop the skills from year 2 as well as adding new skills such as catheterisation, ABGs, breast examination, ANTT and speculum examination. Histories continue to be developed with a focus on specialty specific presentations eg for cardiology – chest pain, dyspnoea, arrhythmia etc. Required experiences include histories, observed examinations, DOPS for clinical skills, ward rounds, theatre, clinics and investigative experiences such as witnessing echocardiography, pleural procedures etc.

They will be starting to develop a differential diagnosis and asking relevant associated questions and identifying the relevant examination findings. Rather than just histories, they complete CPAD – where they present history and examination findings, and then discuss with you their differential diagnosis, investigation and management plan.

Year 4

8 four-week placements each with an academic week beforehand.

- Medicine – Geriatric Medicine, Renal, Rheumatology, Palliative Care, Oncology & Haemato-oncology, Neurology (including Neurosurgery)
- O & G, Paediatrics (including Child & Adolescent Psychiatry), Psychiatry, GP
- Surgery – Paediatric Head & Neck, Adult Head & Neck, Ophthalmology and Plastic Surgery

Students begin to integrate core themes into their practice including Professionalism, Ethic Legal Context (PELC), Psychology and Sociology of Medicine (PSM), Communication for Clinical Practice (CCP) and Population Perspective and Global Health (PPGH).

Students add new skills such as cannulation, basic airway management, wound care and basic closure while continuing with the clinical experiences as per year 3.

They will now be able to identify most examination findings and perform specialty examinations. They should have developed an associated differentials list and start to consider investigations. They will be able to integrate the patient's ideas, concerns and expectations effectively and present relevant findings succinctly. Rather than just histories, they complete CPAD – where they present history and examination findings, and then discuss with you their differential diagnosis, investigation and management plan.

Year 5

Students undertake an Acute Placement Block with Acute Medicine, Acute Surgery, Critical and Intensive Care, Emergency Medicine, Acute Primary Care and Acute Mental Health. They have their SAMP (6 weeks) – Student selected clinical placement to explore an area recognised as requiring further exposure or of interest for their career. Finally, they have a Probationary Foundation Doctor Placement where they will spend 6 weeks initially shadowing then acting up into the role of FI in a ward-based placement. Students are not allowed to prescribe or request tests involving ionising radiation.

The students are now approaching the level of an FI and should be tying all of the skills together to be able to give succinct history and examination finding along with relevant investigations and a management plan. They may also ask you about the transition to the FI role and seek advice on career planning.

Miscellaneous – resources I have found useful:

RCP guide to ward teaching of medical students:

<https://www.rcplondon.ac.uk/education-practice/advice/how-teach-medical-students-your-ward> (link)

“How to teach medical students” by Mind the Bleep:

<https://www.mindthebleep.com/how-to-teach-medical-students/> (link)

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