

UCL MEDICAL SCHOOL

Year 6 2016-17

Objectives

Fact Sheet 7



Final Year Vision - *“Think like a doctor, act like a doctor”*

The MBBS Final Year programme at UCL ensures students think and act like doctors. By focussing on thinking, students are encouraged to integrate their prior learning in biomedical and human sciences in the early years with all their clinical experience they have already gained in year 4 and 5 and apply it to patient management during longer attachments.

In Good Medical Practice the GMC states: ‘Good doctors make the care of their patients their first concern: they are competent, keep their knowledge and skills up to date, establish and maintain good relationships with patients and colleagues, are honest and trustworthy, and act with integrity and within the law.’

To help guide your learning in the final year and help you to achieve this goal, we have devised a list of learning objectives which are based upon the GMC’s guidance on the outcomes and standards for undergraduate education: *Outcomes for graduates 2015*.

This list is mapped to the learning activities that are available to you during the final year. It has been divided into primary learning areas: where you are most likely to achieve this outcome and secondary learning areas: where this outcome can be used as a basis for guiding your learning.

| Objective | Where you will achieve this learning? | |
|---|---|--|
| | Primary Learning areas | Secondary learning areas |
| The doctor as a scientist | | |
| 1. Critically appraise the results of relevant diagnostic, prognostic and treatment trials and other qualitative and quantitative studies as reported in the medical and scientific literature. Apply findings from the literature to answer questions raised by specific clinical problems | <ul style="list-style-type: none"> • CPP – Evaluation of Evidence • Case of the Month • Medicine and GP Assistantship – (one DGH CBD should include evaluation of appropriate evidence, relating to the patient case.) | <ul style="list-style-type: none"> • Long term conditions module • SSC and Elective |
| 2. Be able to discuss the psychological impact of disease on patients and their families, including in the setting of chronic illness. | <ul style="list-style-type: none"> • GP assistantship • Long term conditions module • Medicine assistantship • CPP – Mental Health | <ul style="list-style-type: none"> • Acute care block • General surgery assistantship • Case of the Month |
| 3. Explain sociological factors that contribute to illness, the link between disease, disease management and health inequalities with reference to occupation and socio-economic status. | <ul style="list-style-type: none"> • CPP – Social Determinants of Health Module • Elective • GP assistantship • Long term conditions module | <ul style="list-style-type: none"> • Case of the Month • Acute care block • Medicine assistantship • Surgery assistantship |

| Objective | Where will you achieve this learning | |
|--|--|--|
| | Primary learning areas | Secondary learning areas |
| The doctor as a practitioner | | |
| 4. Assess a patient's capacity to make a particular decision in accordance with legal requirements and the GMC's guidance (in Consent: Patients and doctors making decisions together). | <ul style="list-style-type: none"> • CPP – Ethics and Law • CPP – Mental Health • Medicine assistantship | <ul style="list-style-type: none"> • CPP – Social Determinants of Health • Case of the Month • Long term conditions module • Acute care assistantship |
| 5. Provide explanation, advice, reassurance and support. | <ul style="list-style-type: none"> • CPP – Communication Skills • GP assistantship • Long term conditions module – especially in outpatient clinics | <ul style="list-style-type: none"> • Medical and surgical assistantship • Acute care block • DGH mock OSCE |
| 6. For all those presentations listed within the UCL Core Conditions list: diagnose and manage clinical presentations including: a) Interpret findings from the history, physical examination and mental-state examination to make an assessment of a patient's problems and a differential diagnosis b) In conjunction with supervisors, make clinical judgements and decisions to formulate a plan for treatment, management and discharge in partnership with patients and carers. This may include situations of uncertainty. c) Justify the selection of appropriate investigations for common clinical cases. | <ul style="list-style-type: none"> • DGH Assistantships • Core DGH teaching programme • GP Assistantship | <ul style="list-style-type: none"> • CPP – Pathological Science • CPP – Anatomy and Imaging • CPP – Use of Medicines • CPP – Mental Health • CPP – Use of Evidence • Year 6 Anchor days • Case of the Month |
| 7. Assess and recognise the severity of acute medical emergencies and provide appropriate initial management including basic first aid and immediate life support where appropriate | <ul style="list-style-type: none"> • Dr WHO/ILS training whilst on DGH placement • Acute care block | <ul style="list-style-type: none"> • Medicine and surgery assistantship • Post finals Preparation for Practice SSC • DGH mock OSCE • DGH procedure card |
| 8. Understand the care of patients and their families at the end of life, including management of symptoms, practical issues of law and certification, and effective communication and team working. | <ul style="list-style-type: none"> • CPP – Ethics and Law • Medicine assistantship • Long term conditions module • GP assistantship | <ul style="list-style-type: none"> • Case of the Month • Year 6 Anchor day teaching |
| 9. Communicate clearly, sensitively and effectively with patients, their relatives or other carers, and colleagues from the medical and other professions, by listening, sharing and responding including in difficult circumstances, such as breaking bad news and when discussing sensitive issues. | <ul style="list-style-type: none"> • CPP – Communication Skills • Case of the Month • GP assistantship | <ul style="list-style-type: none"> • Acute care block • Surgery assistantship • Long term conditions • DGH mock OSCE |
| 10. Establish an accurate drug history, covering both prescribed and non-prescribed medication | <ul style="list-style-type: none"> • CPP – Use of Medicines • Medicine assistantship • Surgery assistantship | <ul style="list-style-type: none"> • Local DGH prescribing/Pharmacy teaching • Mock OSCE assessment • Preparation for Practice SSC |

| Objective | Where will you achieve this learning | |
|---|---|---|
| | Primary learning areas | Secondary learning areas |
| 11. Be able to appropriately plan drug therapy, calculate correct doses and prescribe and record these accurately and safely. | <ul style="list-style-type: none"> • CPP – Use of Medicines • GP assistantship • Medicine assistantship • Surgery assistantship | <ul style="list-style-type: none"> • Case of the Month • Preparation for the Prescribing Safety Assessment • Preparation for Practice SSC • Mock OSCE assessments • Procedure card |
| 12. Be able to detect and report adverse drug reactions, with awareness of patients' use of multiple, complementary, alternative and non-prescribed medications and how the use of these might affect other types of treatment. | <ul style="list-style-type: none"> • CPP – Use of Medicines • Medicine assistantship • Long term conditions module | <ul style="list-style-type: none"> • GP assistantships • Case of the Month • Preparation for Practice SSC |
| 13. Be able to perform and interpret a range of diagnostic and therapeutic procedures, including those listed in the UCL core procedures. | <ul style="list-style-type: none"> • CPP - Clinical Skills teaching • Medicine assistantship • Surgery assistantship | <ul style="list-style-type: none"> • CPP – Anatomy and Imaging • Procedures card • Preparation for Practice SSC • GP assistantship • DGH mock OSCE |
| 14. Keep accurate, legible and complete clinical records making use of computers and other information systems in keeping with requirements of Data Protections and Information Governance and applying the principles, method and knowledge of health informatics to medical practice. | <ul style="list-style-type: none"> • Medicine assistantship • Surgery assistantship • GP assistantship | <ul style="list-style-type: none"> • Acute care assistantship • CPP – Use of Evidence • CPP – Synthesis and Professional Practice • Case of the Month |

| Objective | Where will you achieve this learning | |
|--|---|--|
| | Primary learning areas | Secondary learning areas |
| The doctor as a professional | | |
| 15. Understand and comply with GMC guidance listed in the Doctor as Professional, with particular reference to clinical responsibility, patient-centred care, integrity and confidentiality. | <ul style="list-style-type: none"> • Long term conditions module • Case of the Month | <ul style="list-style-type: none"> • DGH assistantship • GP assistantship • Preparation for Practice SSC • SSC and Elective period • Anchor days • CPP – Synthesis and Professional Practice • CPP – Communication Skills |
| 16. Establish the foundations for life long adult self-directed learning and continued professional development using reflective practice. | <ul style="list-style-type: none"> • DGH and GP assistantship: Supervised Learning Events • Case of the Month | <ul style="list-style-type: none"> • CPP – Synthesis and Professional Practice |
| 17. To develop the ability to work both autonomously and within multi-professional teams where appropriate, whilst recognising one's own personal and professional limits. | <ul style="list-style-type: none"> • DGH and GP assistantship • Long term conditions module | <ul style="list-style-type: none"> • Preparation for Practice SSC • Case of the Month • CPP – Synthesis and Professional Practice |

| Objective | Where will you achieve this learning | |
|--|---|--|
| | Primary learning areas | Secondary learning areas |
| 18. Understand and have experience of the principles and methods of improvement, including audit, adverse incident reporting and quality improvement, and how to use the results of audit to improve practice. | <ul style="list-style-type: none"> • CPP – Evaluation of Evidence module • Elective • GP assistantship | <ul style="list-style-type: none"> • DGH assistantship |
| 19. Respond constructively to the results of feedback and assessments | <ul style="list-style-type: none"> • Mock OSCE feedback • DGH assistantship: Educational supervisor meetings and Supervised Learning Events | <ul style="list-style-type: none"> • CPP – Communication Skills • CPP - Synthesis and Professional Practice • Case of the Month • Preparation for Practice SSC |

| Year 6 Objectives Spreadsheet 2015 | | UCL Expectations | | | | | | | | | | | | | | | | | | | | | | | |
|---|--------------------------|----------------------------|------------------|------------------|-----------------|----------------------|-------------------|--------------------|-------------------|------------------------------|--------------------|---------------|-------------------|-------------|---|-----------------------|---------------------|------------------|-----------------|--|-------------------------------------|---------------|-------------------------------|----------------|----------------------|
| Objective | Primary area of learning | Secondary area of learning | UCL Expectations | | | | | | | | | | | | Year 6 | | | | | | | | | | |
| | | | Acute care | General medicine | General surgery | Long term conditions | DGH Core teaching | DGH procedure card | GP assistant ship | Preparation for practice SSC | Cases of the month | DGH mock OSCE | DR/Who/ILS course | Anchor days | Student selected component and elective | Pathological sciences | Anatomy and imaging | Use of medicines | Use of evidence | Clinical skills and practical procedures | Synthesis and professional practice | Mental health | Social determinants of health | Ethics and law | Communication skills |
| 1. Critically appraise the results of relevant diagnostic, prognostic and treatment trials and other qualitative and quantitative studies as reported in the medical and scientific literature. Apply findings from the literature to answer questions raised by specific clinical problems. | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. Be able to discuss the psychological impact of disease on patients and their families, including in the setting of chronic illness. | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3. Explain sociological factors that contribute to illness, the link between disease, disease management and health inequalities with reference to occupation and socio-economic status. | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4. Assess a patient's capability to make a particular decision in accordance with legal requirements and the GMC's guidance (in Consent: Patients and doctors making decisions together). | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5. Provide explanation, advice, reassurance and support. | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6. For all those presentations listed within the UCL Core Conditions list, diagnose and manage clinical presentations | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7. Assess and recognise the severity of acute medical emergencies and provide appropriate initial management including basic first aid and immediate life support where appropriate | | | | | | | | | | | | | | | | | | | | | | | | | |
| 8. Understand the care of patients and their families at the end of life including management of common, practical issues of law and certification, and effective communication and team working. | | | | | | | | | | | | | | | | | | | | | | | | | |
| 9. Communicate clearly, sensitively and effectively with patients, their relatives or other carers, and colleagues from the medical and other professions, by listening, sharing and responding including in difficult circumstances, such as breaking bad news and when discussing sensitive | | | | | | | | | | | | | | | | | | | | | | | | | |
| 10. Establish an accurate drug history, covering both prescribed and non-prescribed medication | | | | | | | | | | | | | | | | | | | | | | | | | |
| 11. Be able to appropriately plan drug therapy, calculate correct doses and prescribe and record these accurately and safely. | | | | | | | | | | | | | | | | | | | | | | | | | |
| 12. Be able to detect and report adverse drug reactions, with awareness of patients' use of multiple, complementary, alternative and non-prescribed medications and how the use of these might affect other types of treatment. | | | | | | | | | | | | | | | | | | | | | | | | | |
| 13. Be able to perform and interpret a range of diagnostic and therapeutic procedures, including those listed in the UCL core procedures. | | | | | | | | | | | | | | | | | | | | | | | | | |
| 14. Keep accurate, legible and complete clinical records making use of computers and other information systems in keeping with requirements of Data Protection and Information Governance and applying the principles, methods and knowledge of health informatics to medical | | | | | | | | | | | | | | | | | | | | | | | | | |
| 15. Understand and comply with GMC guidance listed in the Doctor as Professional, with particular reference to clinical responsibility, patient-centred care, integrity and confidentiality. | | | | | | | | | | | | | | | | | | | | | | | | | |
| 16. Establish the foundations for the long adult self-directed learning and continued professional development using reflective practice. | | | | | | | | | | | | | | | | | | | | | | | | | |
| 17. To develop the ability to work both autonomously and within multi-professional teams where appropriate, whilst recognising one's own personal and professional limits. | | | | | | | | | | | | | | | | | | | | | | | | | |
| 18. Understand and have experience of the principles and methods of improvement, including audit, adverse incident reporting and quality improvement, and how to use the results of audit to improve practice. | | | | | | | | | | | | | | | | | | | | | | | | | |
| 19. Respond constructively to the results of feedback and assessments. | | | | | | | | | | | | | | | | | | | | | | | | | |