

Undergraduate Teaching Newsletter

Undergraduate Teaching Matters James Warner

Welcome to a bumper edition of the undergraduate teaching newsletter. This edition has two guest articles; one on teaching in substance misuse and an "Interview with medical students". But first, the news.

First, congratulations to **Lola Odebiyi** for being awarded a coveted Imperial College Award for Teaching Excellence. Lola, who works in the learning disability team at Harrow was nominated by her students and was one of only 10 awards made across the whole of the faculty of medicine this year.

Secondly I would like to extend a tremendous vote of thanks to **Pepe Catalan** who, for many years was Site Coordinator for Chelsea and Westminster hospital. Pepe recently resigned this role. I am delighted to welcome Claudia Wald as Pepe's replacement. A list of site-coordinators and their contact details appears in this newsletter. The medical school have issued a statement of values and attitudes which appears on the back page of this edition.

Honorary Contacts

If you have applied for an honorary contract and are still waiting to hear about it, please contact me and I will do my best to chase it for you. One advantage of having an honorary contract is access to the new-look Imperial College teaching homepages which are full of useful information.

Work Experience Placements

This is the first year we have formally run the work experience placements for school students. I'm delighted to report this was a great success. Eight students were placed and we have received some very positive feedback, including at least one student who wants to be a psychiatrist! Please ensure all students requesting work experience in the future are coordinated through Sonia as this ensures they have insurance cover, risk assessment and necessary approvals.

The new academic year is upon us and a new group of students are already in placement. The course guide and handbook have been updated and are available on Trustnet. I thought that it would be helpful to remind everyone involved in education of a few of Imperial College's policies.

Summary of Imperial College Policies relating to Students

RESTRICTED ACTIVITIES ON CLINICAL PLACEMENTS

Students are not permitted to write official letters or reports about patients (eg discharge summaries), or order drugs, investigations or other procedures on patients. Similarly, students must not log into a hospital electronic system using the name and password of a member of NHS staff. Students do not carry the appropriate insurance cover, and in many cases such activity would be illegal. Failure to comply with these directives is likely to lead to a "Fitness to Practice" review, or the student's dismissal from the College.

PASTORAL CARE

It is helpful for any concerns about students to be relayed to us as soon as possible. They can be communicated to any of the following

- via the Teaching Co-ordinator at your site who often serve as a first point of contact for students with problems;
- direct to Sonia Lewis or myself (my mobile number is 07970 849818)
- to the Clinical Curriculum team in the Undergraduate Medicine Office
- to Dr Martin Croucher, Head of Pastoral Care, Faculty of Medicine on 020 7594 9824
- to the student's Personal Tutor—a list is available from Janette Shiel, Student Services Manager, 020 7594 9801 or j.shiel@imperial.ac.uk.

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Summary of Imperial College Policies relating to Students (continued)

ATTENDANCE

Student attendance is required on all teaching days, with few exceptions. In summary:

- Full-time attendance at all clinical attachments is compulsory for all students.
- Requests for absence for any reason other than sickness (for example conference attendance) must be approved by the Head of Undergraduate Medicine, Prof Jenny Higham
- Students are responsible for ensuring that all relevant teaching staff are informed if they are to be absent for any reason.
- If you have any concerns about a student's attendance, please contact your local site teaching co-ordinator Sonia Lewis or me.
- Any student who receives an unsatisfactory assessment for a clinical attachment due to poor attendance may be required to repeat the attachment. This could lead to delayed entry into examinations, and therefore affect progression on to the next year of the course. For this reason I prefer to deal with poor attendance early in the placement.
- Year 5 students have one floating week in year 5, which can be taken during various attachments. Students must apply to take their week and will need to ask you to sign their request form, or send a confirmation email to the UMO.
- Students are NOT expected to be in attendance on clinical attachments on bank holidays, unless directly advised otherwise by their firm leaders.

Addiction Teaching to be timetabled for Undergraduate Psychiatry



Addiction Services are firmly established within psychiatry providing easy access and management to individuals with complex needs arising out of addictive behaviours, and help for their carers. Our Trust's Medical Education Group recognises that training in this area

covers a core skill for medical students. Historically, the opportunity has existed for Imperial College students to experience drug and alcohol assessments. The feedback has been encouraging. When the addictions consultants were asked if they would be willing to formalise their teaching for undergraduates, their response was unanimously positive.

The Central and North West London NHS Foundation Trust is in the fortunate position of having an Addiction and Offender Care Directorate (AOCD) that covers nine boroughs and four prisons, extending from Westminster to Hounslow and Chelsea to Brent. Demographically, the service covers areas of extreme poverty and affluence. There is a highly transient, ethnically diverse, population and we treat concentrations of different cultural groups. Health needs vary from homeless people to pregnant substance-using women.

It is our intention that Imperial College students will be involved in assessing people with drug and alcohol problems and learn to tell the difference between the dependent and harmful use of alcohol. They will be exposed to different management pathways, from detoxifi-

cation regimens and abstinence to drug substitution and injectable opiate prescribing. An important part of our work involves harm minimisation and relapse prevention. Students will learn about the wider aspects of addiction healthcare, including liver disease, blood borne viruses including HIV and Hepatitis C, and mental health management. As part of recovery, students will be encouraged to think about individuals' social, legal, housing and employment opportunities.

The AOCD clinics consist of multidisciplinary teams with input from medical staff, specialist nurses, pharmacists, occupational therapists, psychologists and family therapists.

For students' convenience, we will allocate them for assigned addictions experience at centres close to their psychiatry attachment. Locally, addictions consultants will facilitate training and work to agreed learning outcomes.

This addition to Imperial College students' psychiatry training will equip them to confidently assess, diagnose and manage individuals with complex medical and social needs. I hope this will engender enthusiasm amongst students anticipating a career in psychiatry and I believe the experience will be invaluable for future GPs, hepatologists, infectious disease specialists and doctors working in accident and emergency departments.

*Dr. Jonathan Dewhurst
SpR in Addiction Psychiatry*

Interview with Medical Students

In July 2007, Hillingdon Mental Health Services became a placement site for Imperial College medical students for the first time ever. One year later, Dr Jeffrey Fehler (Site Coordinator) interviewed three Year 5 medical students Eda Lum, Chris Allen and Ali Alsafi, who reflected on their experience of their placement. Here are some of their responses.



**Dr Jeffrey Fehler
& medical students**

What were some of the highlights of your psychiatry placement?

Eda: The excellent teaching experience provided by our mentors and consultants. The allocation of Specialist Registrar mentors was an excellent arrangement and their dedication, fervour and approachability really made learning much more enjoyable.

Chris: The highlight for me was a visit to the police cells and custody suite at Uxbridge Magistrates Court with the Arrest Referral Nurse, Lynne Pay. This was a rare opportunity.

Were you anxious before you started psychiatry and if so what about?

Chris: I was familiar with Psychiatry as during my BSc year I completed some research relating to mental health and substance misuse. However, when I arrived on the ward for the first time, it was unnerving. Despite my initial impressions, I soon realised that not all mental health patients are dangerous and intimidating.

Ali: I was very nervous as I did not know what to expect. But once you get started things get easier.

What has been the highlight of Year 5 for you?

Chris: The placement I enjoyed the most was Obstetrics and Gynaecology. On the labour ward, I felt very much part of the team and enjoyed dealing with patients who were not necessarily ill, but were just having a baby!

Ali: My paediatric attachment. It is General Medicine, but with little people. One of my consultants commented that paediatrics is the only specialty where you can be child-like without being called childish!

What aspects of psychiatry have you felt the least comfortable with?

Eda: On occasions, when I was involved in the management of crisis situations with distressed patients, I felt saddened by the helplessness of the situation. In such desperate situations, I almost felt tempted to help these patients myself, for example by giving money or providing housing for the patient myself. However, one of the most significant achievements for me was developing an awareness that the best way to help these patients is to equip myself with knowledge of resources available and to channel my energy to help these patients access these resources.

Chris: I found it difficult to communicate with patients in the learning disability clinic. I was impressed by the way staff seemed able to communicate with them effectively and get anything meaningful across.

How did you find Hillingdon Mental Health Services as a placement site?

Eda: I found Hillingdon to be an excellent place to learn psychiatry, particularly because of the set-up of mental health services. We were exposed to all the different aspects of psychiatry with a wide variety of clinical experience.

Would you consider psychiatry as a career? If not, what area of medicine are you most interested in at this stage?

Chris: I have enjoyed most of my attachments so far, but don't know as yet which area of medicine I will go in to. I would not rule psychiatry out. Whatever I decide, knowledge of psychiatry seems useful no matter what area of medicine one practices, as mental illness is more prevalent than most people think.

Ali: Psychiatry is a very interesting and unique specialty, and I enjoyed my attachment, however I really love medicine and would love to go into a medical specialty.

What was the most valuable lesson you learned from the placement?

Eda: I gained a greater understanding towards the practice of psychiatry as a whole. In particular, realising that there is no ONE panacea to solve a patient's problems. What seems to be required is a great amount of patience, a whole lot of listening and input from a wide group of professionals in order to provide holistic care for a patient. Coming from a very 'lets-fix-it-with-medication' mindset, Psychiatry really showed me the potential frustration and indeed the value of taking a longer-term approach. I also gained awareness of the impact of mental illness on those supporting patients, including doctors themselves and treading the fine line between getting too emotionally involved and the need to empathise with and understand the difficulties that patients and their carers face.

Imperial College School of Medicine values and attitudes statement

We expect you to develop and demonstrate the attitudes and values which we believe are essential to the learning and practice of medicine throughout your undergraduate course.

By the end of your undergraduate medical course you will have acquired the appropriate professional attitudes and values and be able to demonstrate that you have done so. These attitudes and values are:-

Attitudes concerned with learning:

- responsibility for your own learning not only as an undergraduate but after graduation (continuing professional development)
- an enthusiastic approach to learning that demonstrates critical curiosity
- a flexible attitude that is responsive to change
- the confidence to adapt clinical behaviour in the light of new knowledge

Personal attitudes and values:

- an awareness of your limits of knowledge and skills and a willingness to extend your boundaries
- respect for your own values and those of others

Professional attitudes and values:

- awareness of the impact of prejudice and discrimination (including your own) on medical practice
- a capacity for self audit and active participation in peer review
- a respect for the individuality of self, patients, colleagues, family and friends
- an awareness and understanding of professional responsibilities including:
 - appropriate support for colleagues and peers
 - contributing to teaching and research
 - maintaining professional confidentiality
- a patient-centred approach:
 - acknowledgement of patients' expectations and perceptions including:
 - * health beliefs
 - * respect for patients' autonomy
- recognition of the whole person: social, psychological, and biological
- a critical awareness of the diversity, strengths and weaknesses of different attitudes within the profession
- the ability to maintain a balance between empathy and objectivity in order to alleviate patients' distress and suffering
- the ability to apply scientific method and an evidence based approach to medical decision making including the evaluation of probabilities for diagnosis and management
- the ability to tolerate uncertainty, to make professional decisions in the light of this and a willingness to share uncertainties and probabilities with colleagues and patients appropriately
- an ability to reflect on your own practice in order to improve your knowledge, skills and attitudes and to enhance the creativity of your clinical practice.

CNWL Main Contacts:

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CNWL Site Co-ordinators:

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CNWL Site Co-ordinators:

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