# COMMUNITY BRAIN AND BEHAVIOUR PLACEMENT YEAR 4 MBBS



# BARTS AND THE LONDON MEDICINE AND DENTISTRY COMMUNITY BASED MEDICAL EDUCATION (CBME)

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# 1. Introduction

Welcome to Brain and Behaviour in the Community. The life of a GP rarely centres on specific subjects. Your GP tutors are tasked with teaching General Practice **with a focus** on Neurology and Psychiatry. You may well see patients with problems not related to Neurology and Psychiatry, this is part of your learning experience and the week should be seen as part of the broader experience of understanding Brain & Behaviour in the context of Primary Care.

**Firstly, we need to acknowledge COVID-19** and what this has meant for your education and how it will impact the coming year. It has been a challenging 18 months and even though socially COVID-19 concerns are reducing, in healthcare they are still an on-going worry.

We are here to support you through this and have been working very hard to put measures in place to help ensure your Community Medicine Placements are as close to previous years as possible. Saying that, there are still social distancing concerns despite vaccination especially in small departments like GP surgeries.

It is important that you learn about common neurological conditions such as headaches, spinal pain and peripheral neuropathies. All practices have patients with Chronic CVAs, Epilepsy and Diabetic Neuropathy in primary care and it is educational to meet these patients and consider their care in the community.

Psychiatry forms a great deal of primary care, it is estimated that at least a quarter of patients seen in General Practice have a mental health component in their consultation. This is an opportunity to see patients with anxiety/depression, somatisation, alcohol and drug problems in the community. These patients are often willing to discuss their lives with students and this is a valuable chance to practice mental state examinations.

Ophthalmology is also part of the B&B module and routine eye check in diabetes and hypertension clinics are all relevant to widening your learning experience.

SSC sessions are distributed through Year 4 and one session has been allocated to this week in placement.

## 2. Changes to Clinical Placements – due to COVID-19

Please be aware of the changes for this coming year, for many reasons we have felt the need to reduce the number of students in placement at one time and have thus halved the number attending.

Normally you would go for 4 days. Now say in a group of 8 students allocated to a practice, 4 will do for Monday and Tues and the other 4 Thursday and Friday. With Wed AM SSC and PM sports as usual.

During your time not in placement that week, you will be provided with lots of helpful cases to work through, resources etc to aid you to meet your individual learning objectives. This "Self-Directed Learning" details are in a separate section at the end of this document.

# 3. WHO'S WHO

Dr Dev H. Gadhvi	Co-Lead Year 4, CBME Clinical Lecturer	<u>d.h.gadhvi@qmul.ac.uk</u>
Dr Rohini Sabherwal	Co-Lead Year 4, CBME Clinical Lecturer	r.sabherwal@qmul.ac.uk
Mr lim Manzano	Vear 4 Administrator CRME	i manzano@gmul ac uk
Mr Jim Manzano	Year 4 Administrator, CBME	j.manzano@qmul.ac.uk

For all **initial enquiries** or issues about the GP community placements please contact <u>Jim</u> <u>Manzano</u>.

## 4. LEARNING OUTCOMES – Neurology

#### AIMS

• To develop an understanding of common neurological conditions presenting in General Practice, considering how these illnesses affect patients and their carers in the community

• To be able to take a focused history and examination and develop a differential diagnosis

• To be able to develop a management plan, including investigations, for patients with common neurological conditions

#### Learning Outcomes

By the end of the module students will have:

- Been introduced to patients with common neurological conditions
- Considered patient centred care and its application in the consultation

• Received GP tutor feedback on their clinical skills

#### **Knowledge**

Students will be expected to acquire clinical knowledge in areas of medicine relevant to community based practice. The following list is illustrative of diseases we would expect students to learn about during Brain & Behaviour (including the GP placement). This list is neither exhaustive and nor exclusive. For more information please see COMPAS.

- Headache
- Spinal pain
- Parkinson's Disease
- Dementia
- CVA and TIA
- Multiple Sclerosis
- Parkinson's Disease
- Epilepsy
- Motor Neurone Disease

# **LEARNING OUTCOMES – Psychiatry**

#### Aims

• To develop an understanding of common psychiatric conditions presenting in General Practice, considering how these illnesses affect patients and their carers in the community

• To be able to take a focused history and examination and develop a differential diagnosis

• To be able to develop a management plan, including investigations, for patients with common psychiatric conditions

#### Learning Outcomes

By the end of the module students will have:

- Been introduced to patients with common psychiatric conditions
- Considered patient centred care and its application in the consultation
- Received GP tutor feedback on their clinical skills

#### **Knowledge**

Students will be expected to acquire clinical knowledge in areas of medicine relevant to community-based practice. The following list is illustrative of diseases we would expect students to learn about during Brain & Behaviour (including the GP placement). This list is neither exhaustive and nor exclusive. For more information, please see COMPAS.

- Depression including postnatal depression
- Anxiety/ Panic attacks / Panic disorder
- Medically unexplained symptoms / somatisation disorder
- Alcohol screening and health promotion
- Drug addiction
- Memory loss and Dementia

# 5. Community Brain and Behaviour Portfolio

You will spend 2 days in General Practice.

There are a couple of requirements for your sign off of this placement. Details of which are below. These are to aid your understanding of these topics from a community point of view. We do appreciate there are also sign offs in your Hospital Based logbooks and that some of those skills could be signed off in the community. Your GP Tutor is aware of both and should help to facilitate this.

Please keep proof of these tasks below. Feel free to add images of writes up etc. This will then need to be shown to you Tutor to allow for sign off. Please then keep this document as evidence of your engagement and upload into your portfolio.

1. We are asking all Year 4 students to complete three **new dementia e-modules.** These have been developed specifically to address an identified learning need that is not being met at the moment.

NB. To access this you will need a QMPlus login. Please contact Jim Manzano (j.manzano@qmul.ac.uk) at the medical school to arrange a password if you do not have one.

Self -Verification of completed 3 modules

2. Details of Sign of **3 of 5 common neurological conditions**: (headache, spinal pain, Parkinson's disease, dementia and a chronic neurological condition).

**CASE Summary** 

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3. **One case study** in psychiatry that they will be expected to undertake during their time in general practice. Students should write up this case and present it to their GP tutor.

Summary of Case	
Observations	
Reflections	
Future Learning Identified	

STUDENT NAME and ID no. DATE

# 6. Self – Directed learning

We have spent time creating materials and colleting resources for you to help meet your learning objectives. Trying to base learning around a patients' narrative.

1. **Case Studies for Neurology and Psychiatry.** (found on QM Plus). These are interactive resources that tells of 2 patients medical journey. Poses various questions to you and provides useful resources for you obtain the "answers". This depending on how many gaps in your knowledge there are, could take approximately a 2 days to work through. **These are not mandatory and act as a guide to aid learning, it depends really on how you learn best.** 

2. Intro Lecture to B&B recording - found on QM plus by Dr. Dev Gadhvi

3. Below are some **Learning Resources** to help you learn. We **DO NOT** expect you to do all of these; just what you think will help you.

#### Learning Resources

BMA/BMJ E learning modules – will need to access through QM library as not all modules accessible through BMA log in.

"Speaking Clinically" resource – please email Malgo Miranowicz (m.miranowicz@qmul.ac.uk) or for student log in details.

Please consult usual methods of learning like NICE guidance, CEG Guidance, GP notebook and advice to patients is always useful from patient.co.uk

In Primary care neurology and psychiatry management is centered around a holistic approach given the nature of the conditions. Please be mindful of this when learning.

#### Neurology

#### In BOLD are priority

- <u>BMJ Epilepsy E learning- https://learning.bmj.com/learning/module-intro/epilepsy-primarycare.html?moduleId=10048059&searchTerm="depression%20primary%20care"&page
  </u>
- =3&locale=en\_GB
   Multiple Sclerosis Society https://www.mssociety.org.uk/?msclkid=5ba170b5ae1212acf2be2ef1a276d792&utm\_s ource=bing&utm\_medium=cpc&utm\_campaign=PX%20%7C%20Brand%20%7C%20Engla
  - nd&utm\_term=ms%20society&utm\_content=PX%20%7C%20Brand
- Migraine society https://www.migrainetrust.org/
- Living with dementia Patient voices https://www.patientvoices.org.uk/flv/0866pv384.htm
- <u>Stroke- Patient voices - https://www.patientvoices.org.uk/flv/0111pv384.htm</u>
- <u>Headache thunderclap but was migrane non SAH -</u> <u>https://speakingclinically.co.uk/videos/sudden-headache-probably-migraine/</u>
- MS https://speakingclinically.co.uk/videos/multiple-sclerosis-3/
- <u>PD https://speakingclinically.co.uk/videos/parkinsons-disease-on-off-fluctuations/</u>

## Psychiatry

- <u>Mental Illness in Primary care -</u> https://www.mind.org.uk/media/4556511/13296\_primary-care-policy\_web\_op.pdf
- GAD in Primary care E learning module https://learning.bmj.com/learning/module-intro/generalised-anxietydisorder.html?moduleId=10057971&searchTerm="depression%20primary%20care"&p age=1&locale=en\_GB
- <u>BMJ E learning Anorexia in Primary Care –</u> <u>https://learning.bmj.com/learning/module-intro/anorexia-</u> <u>childhood.html?locale=en\_GB&moduleId=10063032</u>
- <u>E module on Childhood trauma -</u> <u>https://fairhealthlearning.s3.amazonaws.com/Childhood%20trauma%20and%20adver</u> <u>se%20experience/index.html#/</u>
- Overdose https://speakingclinically.co.uk/videos/impulsive-overdose/ (NOTE THE Q ASKED)
- OCD https://speakingclinically.co.uk/videos/obsessive-compulsive-disorder-2/
- <u>Bipolar https://speakingclinically.co.uk/videos/obsessive-compulsive-disorder-2/ (note stress/crisis precipitant)</u>
- <u>Alcohol Dependence https://speakingclinically.co.uk/videos/alcohol-use-disorder-4/</u>

4. <u>CAPSULE quizzes –</u> log in sent to you Spring 2020. If lost please contact Rugina Monnan or Malgo Miranowicz.