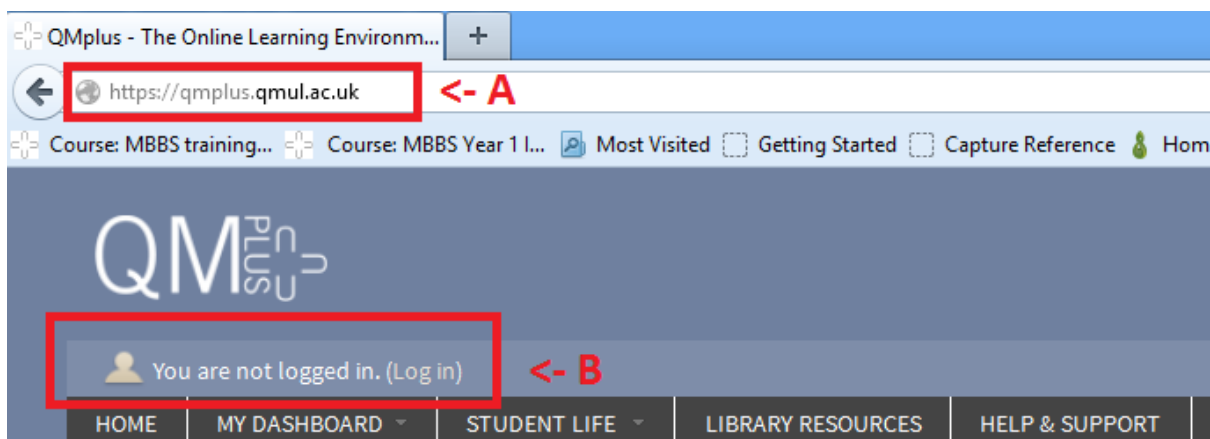


Guide: How to give feedback a student's reflective writing on QMPlus.

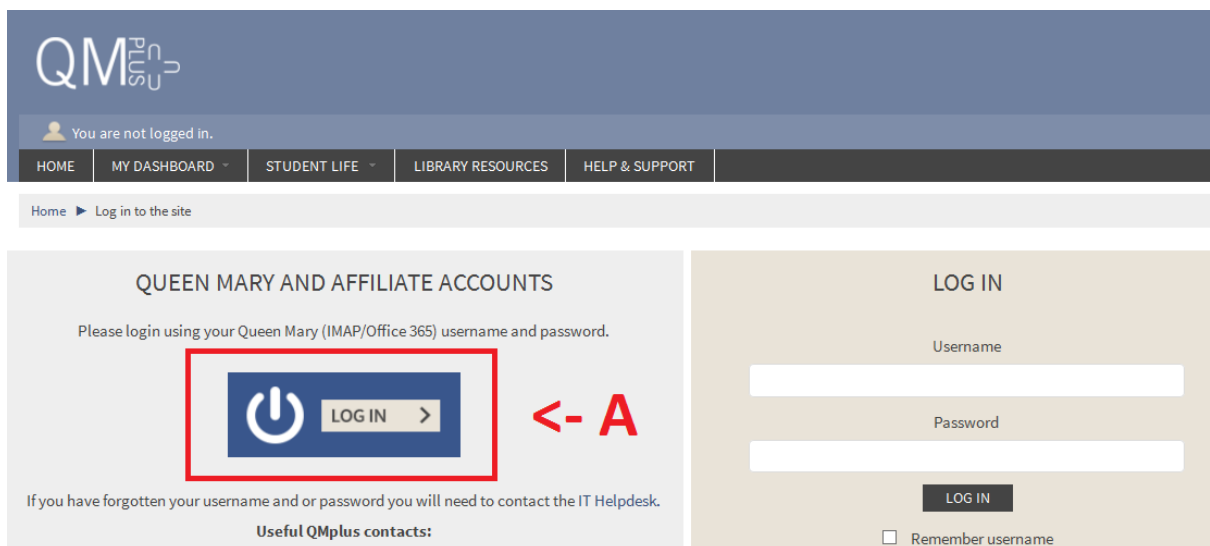
Step 1:

- A. Navigate your webbrowser to [www.qmplus.qmul.ac.uk](https://qmplus.qmul.ac.uk).
- B. Click on "Log in" on the top-left corner.



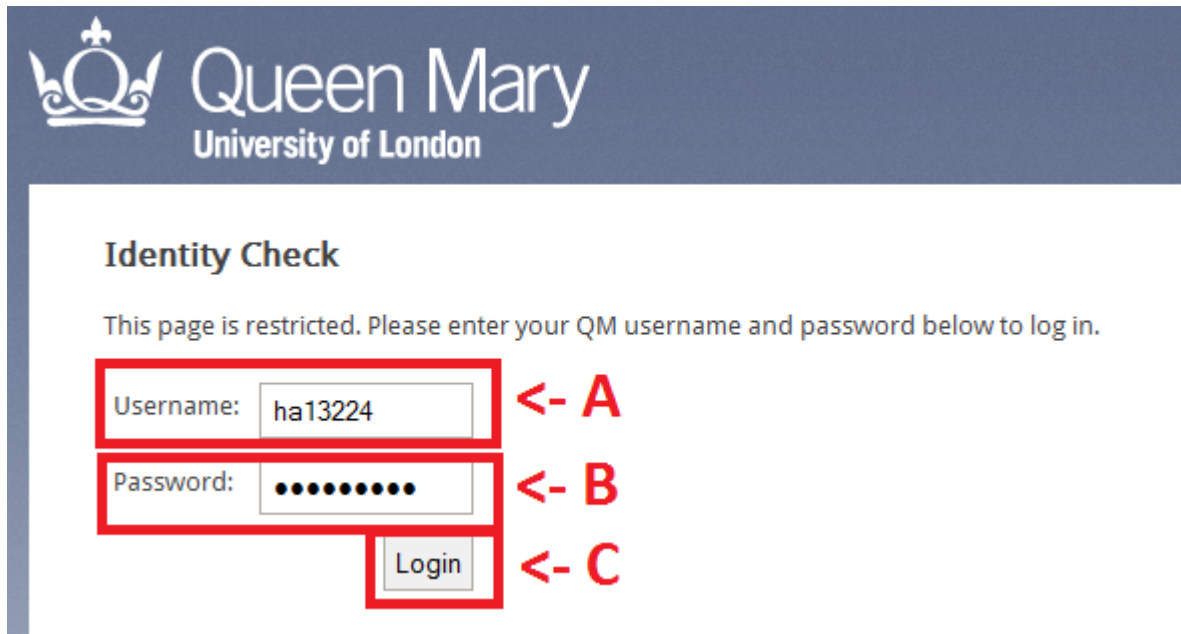
Step 2:

- A. Click on "log-in" another time on the left hand-side.



Step 3:

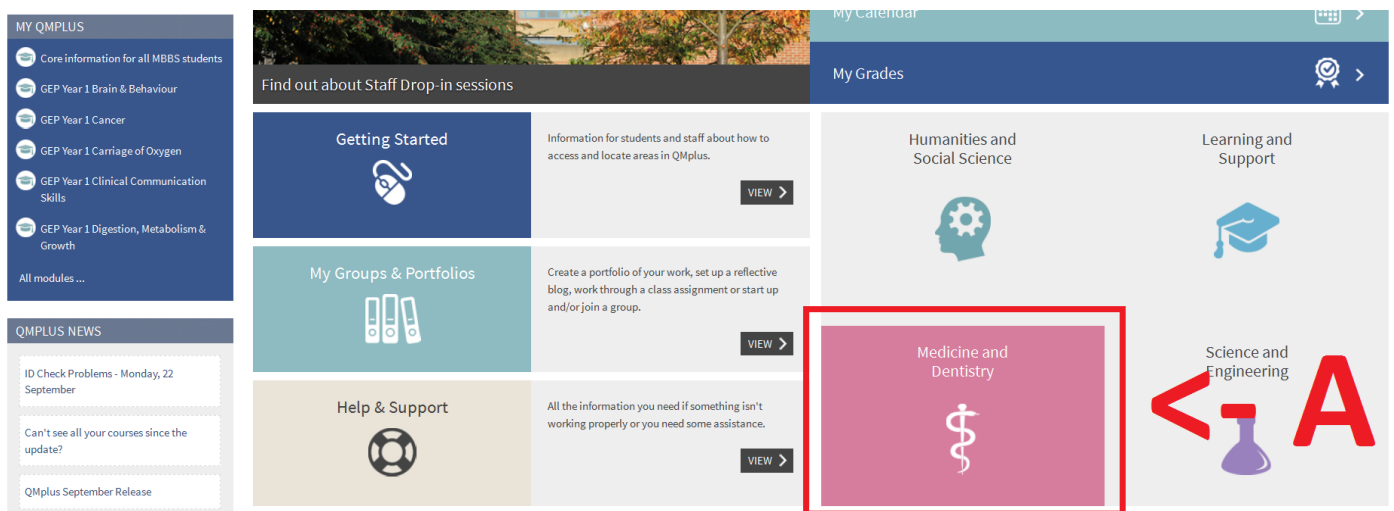
- A. Fill in the username you have been given by the university.
- B. Fill in your password.
- C. Click on “Login” after the information above has been entered.



Step 4:

After you’ve logged in successfully, you should now be presented with the homepage. Now:

- A. Scroll down on the page, and click on the “Medicine and Dentistry” logo on the bottom-right.




Step 5:

You will now be presented with a different page. Now:

- A. Click on “Undergraduate Medicine – MBBS”.

Home ▶ Courses ▶ Medicine and Dentistry ▶ Medicine and Dentistry QMplus Faculty Landing Page



OUR INSTITUTES , CENTRES & PROGRAMMES

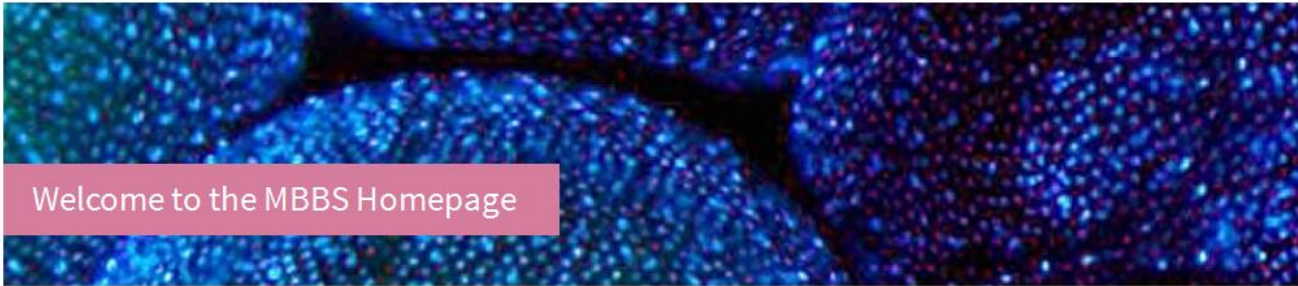
Barts Cancer Institute	Blizard Institute	Institute of Dentistry
Institute of Health Sciences Education	Undergraduate Medicine - MBBS	William Harvey Research Institute
Wolfson Institute of Preventive Medicine	SMD E-learning User Group	SMD Faculty Admin

A red box highlights the "Undergraduate Medicine - MBBS" button, and a red arrow labeled "A" points to it from the right.

Step 6:

You have now arrived at the MBBS Homepage. Depending on what year group you are marking, please click on:

- A. “GEP Year 1”
- B. “Year 1 MBBS”



Welcome to the MBBS Homepage

SELECT YOUR YEAR GROUP

GEP Year 1 [A]	Year 1 MBBS [B]	Year 2 MBBS
Year 4 MBBS / GEP Year 3	Year 5 MBBS / GEP Year 4	Core Info for all Students

Each button includes a red right-pointing arrow and a caduceus icon.

Step 7:

You have now arrived at the Landing Page for that respective year group. Scroll down to the bottom of the page and:

- A. Expand the “Medicine in Society” section by clicking on it.
- B. You are now presented with a list of resources and activities:
 - For example: The “Medicine in Society Guide” – The handbook that contains learning objectives and information that students are required to read BEFORE each placement day.

The screenshot shows a vertical navigation menu with the following items:

- GENERAL INFORMATION
- INDUCTION WEEK
- STUDY SKILLS
- MEDICINE IN SOCIETY** (highlighted in a light brown bar, with a red arrow and the letter 'A' pointing to it)
- SSC (STUDENT SELECTED COMPONENTS)

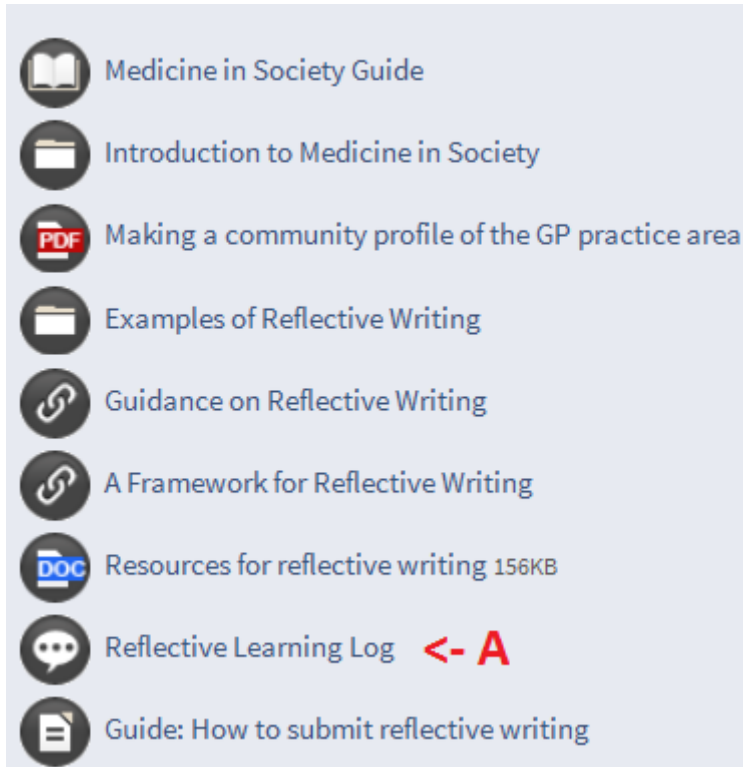
Under the 'MEDICINE IN SOCIETY' section, a list of resources is displayed, each with an icon:

- Medicine in Society Guide
- Introduction to Medicine in Society
- Making a community profile of the GP practice area (PDF icon)
- Examples of Reflective Writing
- Guidance on Reflective Writing
- A Framework for Reflective Writing
- Resources for reflective writing 156KB (DOC icon)
- Guide: How to submit reflective writing

A red bracket on the right side of the list groups these resources, with the label **[B]** next to it.

Step 8:

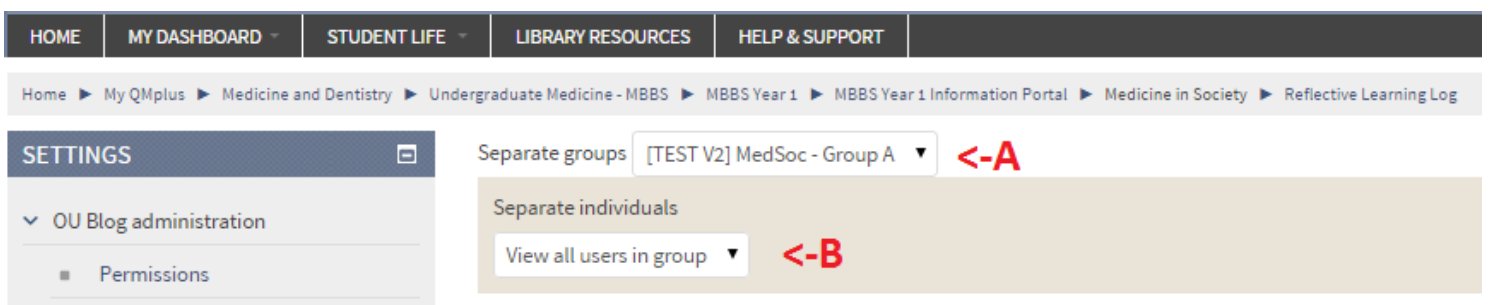
- A. From the list of resources and activities show, click on “Reflective Learning Log” activity to access the students’ work.



Step 9:

You have now arrived at the blog where the students’ work will be presented.

- A. If you are teaching two different groups AND they both groups are from the same year group (Year 1 MBBS or GEP Year 1) you are able to switch between these two groups by clicking on the drop-down list under “Separate groups”. This option is not available if you are teaching only one group of students.
- B. Within one group of students, you can switch between their work by clicking on the drop-down list under “Separate individuals” to isolate and view one students work separately.



Step 10:

All the posts a student has made for their blog during the entire year will be posted on the page you are currently on, with the most recent entry displayed first.

- A. In order to leave feedback (i.e. a comment) scroll down to the bottom of any post and click on “Add comment”.



WEEK 1

Thursday, 18 September 2014, 11:57 AM

by Alison Blaire

REFLECTIVE WRITING

Today a nurse practitioner, GP (former paediatrician) and pharmacy-employee described the prevalent social issues they have come across in this area. When the nurse was talking, I could sense from her voice that it was not easy for her to talk about some of difficult cases and it was really evident she was emotionally resilient, yet very compassionate about her patients. I was expecting to hear about most issues that were brought up, but what especially caught my attention was female genital mutilation (FGM). Early this morning I skimmed through an article in the student-BMJ related to this topic and I had no idea it would be this prevalent (*10% of the women given birth in a maternity ward in central London have been subject to FGM*), especially considering it is very difficult to find out whether a patient has undergone this procedure (*you can only assume this happened by looking at their background/symptoms of infection – and usually it is their close family who has procured them to do this*). In fact, looking back at my initial reaction when I heard the issue coming up, I recall a loud silence in my head when I was listening closely while the nurse was speaking. I have decided to read up on this subject as it is currently required for all doctors to recognise FGM and how to manage sensitive cases (*although they are looking at making it part of the medical curriculum, I found out it is highly unlikely for even junior doctors to be allowed to sit in a consultation of this kind*). I started to realise that I do have a soft side for issues related to abuse and if I was the doctor I would want to do as much as I possibly can to help. But it was highlighted to me the importance for one to know about their limitations. Doctors/nurses can make a huge difference with the advice and medical attention they have to offer. I previously always thought that it was inappropriate for them to get too involved in sensitive issues like this, especially because I think it would test my emotional resilience if this was to be a younger patient. Simply treating their symptoms + referring to social services is not sufficient and not always in the patient’s best interest. There is also a psychological aspect that needs to be addressed when you are involved with patients having undergone a shocking/painful experience that is approved by people who are very close to them, especially at a young age. And luckily, there are charities, non-governmental organisations and special surgical clinics set-up for FGM.

ASSESSMENT OF LEARNING OUTCOMES

Every single time I attend a placement at this practice I get more impressed by the level of organisation of our activities. A real effort was put into meeting our learning outcomes and not only had the GP read our learning objectives, he had printed us copies of the necessary preparatory work – so we have something to refer to during the tutorial. I believe I have truly met the learning outcomes and I am looking forward to see how my next placement will be just as interesting (if not better).

[Permalink](#) [Export to portfolio](#) [Add your comment](#) <- A

Please note: It is possible that you might not be presented with the option “Add your comment” at the bottom of a post. Check the last step of this guide to look at the alternative method of accessing the comments feature.

Step 11:

You will now be presented with the interface shown below.

- Fill in the section "Title" with whatever heading you want your piece of feedback to have, this box can also be left empty if preferred.
- Fill in this section with the feedback you want to give the students. Use the appropriate tools to format your text to make it look as organised as possible (e.g. **Bold [B]**, *italics [I]*, bullet points, etc.).
- Use these options to add videos (e.g. from youtube) or other attachments to your feedback where appropriate.
- When you are satisfied with the content of your feedback. Click on "Add Comment".

▼ NEW COMMENT

Add your comment*

Title

<-A **C**

Paragraph **B** *I*

U ~~S~~ X_2 X^2 \sqrt{a} \pm Ω

Font family Font size

[B]

Path: p

D->

There are required fields in this form *.

Step 12:

After you have submitted your comment you will be shown the post of that week with your new comment presented at the bottom of it, as shown on the image below.

If you wish to mark work from a different week, or return to the original blog activity to select a different student for marking:

- A. Click one “Reflective Learning Log” at the top of the most recent post.

The screenshot shows a university website interface. At the top, there is a dark navigation bar with the following items: HOME, MY DASHBOARD, STUDENT LIFE, LIBRARY RESOURCES, and HELP & SUPPORT. Below this is a breadcrumb trail: Home > My QMplus > Medicine and Dentistry > Undergraduate Medicine - MBBS > MBBS Year 1 > MBBS Year 1 Information Portal > Medicine in Society > Reflective Learning Log > Week 2. The 'Reflective Learning Log' link is highlighted with a red box. A red arrow labeled 'A' points to this link. On the left side, there is a 'SETTINGS' sidebar with options for 'OU Blog administration', 'Permissions', 'Logs', 'Course administration', and 'My profile settings'. The main content area displays a blog post titled 'WEEK 2' by Cain Malico, dated Thursday, 10 September 2024, 11:55 AM. The post includes sections for 'REFLECTIVE WRITING' and 'ASSESSMENT OF LEARNING OUTCOMES'. At the bottom of the post, there are links for 'Permalink', 'Export to portfolio', and 'Add your comment'. Below the post, there is a 'COMMENTS' section with one comment from Bruce Wayne, dated Thursday, 10 September 2024, 1:04 PM. The comment text is 'Brave work' and has a 'Delete' link below it.

Alternative method of posting comments


Please note that, in some cases a comment has previously already been made on a particular post and therefore it will no longer give you the option to “Add your comment” at the bottom of that post straight away. But, instead it will show the number of comments given to that post, as illustrated below:

2 comments (latest by Bruce Wayne, Thursday, 18 September 2014, 3:38 PM)

This is very useful because it allows you to track any further comments that might have been given by the student in response to your feedback. Ideally, posts should be monitored on a regular basis in order to see if anything has been added on to the feedback you have given (by other tutors or the student).

By clicking on “2 comments” you can still navigate also be presented with the relevant post in isolation to the other posts, and with the commenting section below it. To add further comments:

- A. Click on “Add your comment” at the bottom of the post and continue as you would from Step 11.



WEEK 2
Thursday, 18 September 2014, 11:55 AM
by Cain Maliko
Edited by Cain Maliko, Thursday, 18 September 2014, 11:55 AM

REFLECTIVE WRITING

Today, we visited an older patient, living with her (slightly younger) daughter who takes care of her. Earlier that morning we compared the views of the developed and developing world on the elderly. I was glad to see that some of the things we identified that morning were mentioned by the patient during our visit. Mrs. Foreman described how she also has a son, whom she doesn't like to burden with anything that they are unable to do. I started to admit that here in the UK, the elderly do like to stay independent, and even if they are unable to take care of themselves, they probably don't like to bother others with their problems. Unlike where I come from, where even though care homes exist, it's seen as ungratefulness not to take care of an elderly parent who can't take care of themselves. Taking care of your parents, is like returning a favour for their care when you were younger.


On a different note, we also asked her about some of the qualities she appreciated in a doctor, and again, the importance of maintaining eye-contact when communicating was highlighted. This is something I hear quite often but never though was serious. I was surprised when the patient said the same thing. Personally I don't share that view, I don't quite see how doctors are meant to be able to manage an appointment if they don't process the work on the computer during the consultation. This view is also not something that was mentioned by younger patients we have seen during previous MedSocdays. They, just like me, appreciate competence in a doctor more than this. And the older patient also brought up the fact that she has a lot of respect for her doctor, something that definitely brightened my day.

ASSESSMENT OF LEARNING OUTCOMES

I find this week's learning objectives very important in developing an awareness of the needs of today's ageing population. Especially considering this is a topic that requires a lot of attention and careful consideration, I think the learning objectives today are well met in that respect. I have however, no idea what the last point "Identify key policy documents relating to care of older people" is supposed to mean. It doesn't sound very important anyway.

[Permalink](#) [Export to portfolio](#) [Add your comment](#) ← - A

COMMENTS



Thursday, 18 September 2014, 1:01 PM
by Bruce Wayne

Breve work

Delete