

## MBBS YEAR 5: 2024-25

# **PROGRAMME HANDBOOK**





This handbook should be used together with the Academic Regulations. It provides information specific to FMD.

The Academic Regulations provide detailed information on all aspects of award requirements and governance.

## NOTHING IN THIS HANDBOOK OVERRIDES THE ACADEMIC REGULATIONS WHICH ALWAYS TAKE PRECEDENCE.

The Academic Regulations are also available on-line at:

### www.arcs.qmul.ac.uk

The programme handbooks are available on QM+.

The information in this handbook was correct at the time of printing. In the event of any substantial amendments to the information herein, the Programme Leads and/or Administrators will attempt to inform students of the changes.

The College cannot accept responsibility for the accuracy or reliability of information given in third party publications or websites referred to in this handbook.

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## WELCOME MESSAGE FROM DR SAKSENA SAKSENA

## Welcome back and congratulations on making it through the many challenges of the MBBS as far as year five – the final year!

It is a pleasure to welcome you back to what I believe, is the most important and exciting year of your MBBS course. Twelve months from now, vast majority of you would have commenced the first year of your foundation program, your first step in the world of medicine as a doctor!

Arriving at this destination requires to undertake key steps of being awarded the MBBS degrees from QMUL, successful application to the Foundation Program, and securing provisional registration with, and a licence to practice from the GMC.

It is my privilege as Head of Year 5 to guide you as you navigate through this year.

Medicine is a profession held in high esteem and our patients and the public expect from us not just knowledge and expertise, but professionalism as enshrined in GMC Good Medical Practice. The other ask of doctors is to be able to adapt to change and cope with uncertainty.

This is the year where you will embrace change as you prepare to transition from a student to an employee, from an observer to a practitioner, and from bystander to a decision maker. You will move from "knowing medicine" to "doing medicine "in the next 12 months.

I would like to you ensure you are supported in this journey and treated with respect. This journey will require you to take the driving seat and ownership of your learning. This will require determination, dedication and discipline and most importantly time and hard work especially in the period from August 2024 to March 2025 when your studies will require your full attention both inside and out of traditional working hours.

Clinical placements in year 5 are assistantship placements and the key is for you to use every opportunity to learn medicine by 'doing medicine' as much as possible. The placements are your opportunity to join the community of health practitioners and learn your medicine by participating in 'real medicine' in 'real' clinical environments: this is the best preparation for your finals and for your future career as foundation doctor and beyond.

The happiest day of my professional life is when I shake your hands on Graduation Day to hand the scroll with your MBBS degree. I look forward seeing all of you graduate as BLSMD doctors and fly the flag of being excellently trained FY1 doctors.

There are three key tasks that you need to complete this year: pass the finals, submit your application to the Foundation program and apply to GMC for limited registration. Well begun is half done - the Introduction week covers these important areas, and I strongly encourage you to attend the entire week.

There are some changes within this year. The mid-year teaching week in December has been replaced by 4 standalone teaching days on Friday 27 September, Monday 30<sup>th</sup> September, Monday 11<sup>th</sup> November and Friday 6<sup>th</sup> December, please make a note of these dates in your diary as it is important that you attend these dates.

Mindful of the impact of Artificial Intelligence and how it can be a double-edged sword, we are strongly recommending all year 5 students to undertake a module on AI as part of SSC placement (for more information see AI for Student Learning and Research on <u>QM Plus</u>).

We have updated the QM Plus page to make it more user friendly and it will be constantly updated with recordings of lectures as well as communications related to assessments so make sure you visit this regularly.

The School team will send you regular communications about teaching and revision sessions as well as assessments, including important upcoming dates, it is important that you check your emails regularly and save these important links. If you require support or have a query do not hesitate to email Tom or Michael. It is better to contact sooner than later. As, in medicine so in life, prevention is better than cure and if you are struggling, I would advise to seek help sooner than later.

This will be a busy year with tight timelines, and it is essential you engage fully. What does engagement look like? It expects that you check and respond to your emails regularly and promptly as expected of a foundation year doctor, remain vigilant of tasks to be completed and undertake these within the completion dates including timely completion of logbook requirements. All this counts as professionalism which is assessed as part of Paper A and that starts from the first day of your Year 5. Colleagues within placements and within student support team may contact if there are concerns about failure to engage also known a "low level concerns". It is our responsibility such concerns are shared with you and you have the opportunity to discuss these with a senior colleague such as your academic advisor, senior tutor, or a senior academic such as head of student support, Academic lead or head of Year 5, so you are aware of these and have a chance to respond and remediate as required.

Life is not predictable and if there are issues that come up that may impact your engagement contact the year 5 team as soon as possible. If you find yourself in the unsuccessful minority, we will do our best to support you. QMUL offers support in many forms. The elective period following the finals provides some slack for the remediation of placements missed for illness or personal reasons and there is a remediation programme over the spring for those who don't pass the final exams first time around.

The Student Support team is an excellent place to gain help with health and personal problems and can connect you with your academic tutor for academic advice (<u>ihse-student-support@qmul.ac.uk</u>)

The year 5 team in the student office will always do what they can to help with your administrative queries. You are also welcome to contact me directly, especially if you feel that the other resources aren't quite answering your question or addressing your issue. As with so many medical pathologies, the sooner you seek help the more

options we will be able to put in front of you; please don't wait to talk to us until you reach crisis point.

Although we will do what we can to support you through this challenging year, the GMC places on the medical school, as it does on you all individually, a primary duty of optimising patient safety.

"By graduating a student, the medical school is declaring them fit to practise as a doctor." GMC 2016

"Medical school curricula and assessments are developed and implemented so that medical students are able to achieve the learning outcomes required for graduates." GMC 2015

Because of this principle, the support you experience will be aimed at helping you gain the required standard rather than waving you through regardless. I make no apologies for this and hope that you will expect nothing else.

#### **OUTCOMES FOR YEAR 5**

In this way you will meet the overarching outcomes for year 5:

• Be able to assess a patient who presents acutely unwell in a structured way, developing a management plan at a level appropriate for a newly qualified foundation year (FY1) doctor and communicate this to the patient, relatives, and the healthcare team.

• Be able to assess a patient with a long-term condition and complex needs, applying clinical knowledge to the management of the patient and contributing to their planned care at a level appropriate for a newly qualified FY1 doctor.

• Demonstrate the minimum required practical skills under the appropriate entrusted level of supervision as defined in outcomes for graduated practical skills and procedures: https://www.gmc-uk.org/education/standards-guidance-and-curricula/standards-and-outcomes/outcomes-for-graduates/outcomes-for-graduates--practical-skills-and-procedures

• Demonstrate safe practice in medicines management including the review of patient prescribing regimes, operating within systems of safe working within the hospital and the effective written communication of medicines management on discharge.

• Demonstrates a structured approach to managing medical emergencies including the recognition of the sick patient and the safe escalation of care to senior colleagues in the context appropriate to a newly qualified FY1 doctor

• Demonstrates structured management of patients in pain and at the end of life including the assessment of pain and the recognition that a patient is in the final days of life.

• Demonstrate understanding of patient capacity, consent, and confidentiality in their care of patients and know how this applies to clinical situations including action taken to safeguard vulnerable patients

• Demonstrate safe use of written communication, IT and sensitive data including the keeping of contemporaneous medical notes and preparation of discharge summaries

• Demonstrate working effectively within a multi-professional and multi-disciplinary team at the level of a FY1 including the safe presentation, handover and referral of patients and the prioritisation of tasks

• Demonstrate an appreciation of the complexity of health needs, managing multimorbidity, dealing with uncertainty and prioritising tasks

• Demonstrate an understanding of the principles of patient safety, recognition of risk and principles of risk management, clinical audit and quality improvement including

• Demonstrates awareness of equality, diversity and inclusiveness in interactions with patients, their advocates and healthcare professionals and the wider population

• Demonstrates awareness of the role of doctors in contributing to management and leadership of the health system and as architects for future developments

• Demonstrates awareness of the importance of self-care together with personal physical and mental well being

• Demonstrate the ability to direct their own learning in the context of the workplace, including reflective practice and the gathering of evidence that demonstrates they have acquired the necessary competencies of the course

#### **QMUL GRADUATE**

You are a graduate of one of the most prestigious medical schools in the country and a product of the QMUL university which carries a legacy of 900 years of history. I hope you will epitomise the QMUL values of opening the doors of opportunity to al by being inclusive, proud, ambitious, collegial and ethical. <u>Our strategy - MyQMUL</u>

#### CAREER GUIDANCE

As well as passing finals and making the transition from medical student to doctor you should also spend time and energy this year thinking about your career beyond August 2025. For most of you, the next landmark in this process will be an application to core or run through training in November 2026, which will come around surprisingly quickly.

For those of you who know what path you want to follow make sure you understand the person specification for admission to your specialty. These can be found at <a href="https://specialtytraining.hee.nhs.uk/Recruitment/Person-specifications">https://specialtytraining.hee.nhs.uk/Recruitment/Person-specifications</a> and they change every year.

For those of you who don't, make use of the QM careers service and websites such as <u>https://www.healthcareers.nhs.uk</u>. For all of you it is worth building a portfolio as soon as possible – anonymised logbooks, audits, academic projects, publications, conference presentations, electives, prizes, distinctions and any truly exceptional endeavours which make you stand out from your colleagues are worth collecting. Stefan Couch is our careers counsellor and will be very happy to provide guidance for career counselling.

### FEEDBACK

With your various achievements you make us proud to know you and to be involved with your education. We want you to feel equally proud of your association with this great medical school and with this in mind we listen to the feedback we receive from your directly and through your student reps with a view to continuous improvement of the year 5 curriculum. I would also ask, despite the imposition of countless questionnaires, for you to participate enthusiastically in the course evaluation. I hope that when the National Student Survey opens in spring 2025 you will complete the survey to demonstrate just how proud you are of your association with your medical school and contribute to sharing its strengths and areas that need to develop and grow.

Finally, I would like to share with you the mission statement of the Year 5 Committee which summarises the ideas developed above.

"Building on previous experience, to facilitate the development of students as excellent F1 doctors, ideally placed to achieve their chosen career goals and by so doing, to support the reputation of our School of Medicine as being amongst the very best medical schools in the UK"

Wishing you all the best for the year ahead.

Dr Sushma Saksena Head of MBBS Year 5

## **OVERVIEW OF THE YEAR**

#### **INTRODUCTION WEEK AUGUST 2024**

Term starts earlier than for earlier years on Tuesday August 27<sup>th</sup> 2024 with a lecture week which will introduce each of the course elements as well as beginning the programmes to prepare you for the national prescribing safety assessment (PSA) and the process of application to the Foundation Programme through Oriel. Please engage in as many of the events as you can.

#### **CLINICAL PLACEMENTS**

Your clinical placements start on Monday 2<sup>nd</sup> September 2024 till 26<sup>th</sup> February 2025.

During this 6-month period you will rotate through 3 main assistantship placements and SSC 5a. All are equally important to our goal for you of becoming an excellent F1 doctor. Each course component is on QMPlus. Parallel teaching takes place in 'Themes': surgery, medicine, pharmacology, anaesthetics, emergency care, General Practice breaking bad news (BBN), and doctors as teachers and educators (DATE). These along with your 4<sup>th</sup> year themes mirror the clinical specialty contexts for the MLA examination and your finals exam.

Your placement provider will induct you into the local policies and procedures including guidelines so that you are not a risk to patients. You must follow these policies and failure to do so not only puts you and your fellow students at risk but is a serious professionalism issue. Attendance at these induction sessions is mandatory.

Your personal risk and that of your patients and colleagues depends on you having up to date vaccination

Please read EPP policy that will be coming out soon.

If during the year your own situation changes such that you believe your personal risk may change please do contact <u>IHSE Student Support</u>.

#### HOSPITAL ASSISTANTSHIP 1& 2

Much of year 5, including the effective preparation for finals exams, is dependent on putting into practice the workable knowledge, skills, and attitudes acquired throughout the previous years. This is what we mean by **assistantship- the participation in work in the same setting in which foundation years training will be spent**. It prepares you for the role you will undertake as an F1 doctor. In this way the design of the placements is focused on taking on a role in the team, close to the foundation doctors that you will soon become, and in contexts that will provide the experience you will need in order safely perform that role.

The Hospital Assistantship is divided into two placements of different lengths- an 8 week block (1) and a 4 week block (2). The combination of these two blocks should enable you to fulfil assistantship roles in the context of surgical and perioperative medicine, general medicine, the emergency department and critical care environments. Immediately before or after the second block you undertake a Student Selected Component.

Y5 Module	length	Thematic Focus on:
Hospital	8 weeks	Surgery/ Perioperative medicine including
Assistantship 1		anaesthetics /General Medicine (Includes medical school-based simulation medicine day)
Hospital	4 weeks	Emergency Medicine & 1 week ITU
Assistantship 2		(Includes medical school-based ILS Course)
SSC5a	4 weeks	Students select SSC from Med School catalogue and placements are allocated by students' preferences. Students also have option to self- organise. See separate SSC documentation

This will mean that the physical location of your assistantship and your planned learning sessions will reflect the focus of the two different modules, but the placement is not defined by a particular area of clinical practice.

There is a separate handbook for <u>Hospital assistantships</u> on QMPLUS.

#### **GENERAL PRACTICE ASSISTANTSHIP**

Eight weeks of attachment to general practice teams centred on seeing undifferentiated presentations and chronic disease management. You will see patients virtually and face to face in practice and partake in other activities cantered on the team and patient health. There are centrally taught online sessions at the start and end of the eight weeks and sessions planned regularly throughout. You will also be timetabled for your BBN and DATE sessions during this 8 weeks.

### **SIM** (SIMULATION)

This is a simulation day designed to provide knowledge and skills in the management of clinical crises, especially from the viewpoint of human behaviour. This approach develops higher order thinking skills around decision-making and problem-solving strategies. There are 6 simulated scenarios, situated within either an A&E or acute ward environment. In pairs you will each in turn participate in the management of an acutely ill patient.

#### BREAKING BAD NEWS (BBN)

Giving bad news is something you will do many times throughout your professional career and as such preparation is essential to help you and your future patients with this difficult task. This course run through the Clinical Communication and Learning Skills Unit based at the Robin Brooke Centre but delivered online

#### **DOCTORS AS TEACHERS AND EDUCATORS (DATE)**

This short course aims to support you with the skills you will need when teaching as foundation doctors and beyond. It focuses on planning and then evaluating small group teaching. This year it will be delivered via materials on <u>QMPlus</u>, you will also have an optional drop-in session with the course leads should you have any queries.

#### **CLINICAL PHARMACOLOGY AND THE PSA**

In year 5 you will receive teaching in clinical pharmacology in parallel with as well as on placements. The requirements for this area of the course are listed in the logbook. The three in house safe prescribing examinations (SPE) will take place online on 30<sup>th</sup> August 2024, 6<sup>th</sup> December 2024 and 10<sup>th</sup> January 2025. Working hard towards these formative exams to achieve as high a score as possible represents an excellent way of preparing for the national Prescribing Safety Assessment (PSA).

The national PSA is set by the Medical Schools Council in association with the British Pharmacological Society. This high-quality assessment has been adopted into the MBBS Part 5 scheme of assessment. You will need to secure a pass in this exam to complete the year successfully and be awarded the MBBS degrees

More details about the exam can be found at <u>http://www.prescribe.ac.uk/psa/</u>.

The regulations around the PSA are different to those for QMUL exams. Please consult the site above for information about extenuating circumstances and reasonable adjustment. Please be aware that late arrivals will not be admitted to this exam.

#### FOUNDATION PROGRAMME APPLICATION SCHEME

The Application to Foundation Programmes (including the Specialised (academic) foundation programme) also runs in parallel to placements and there are further details on the <u>Year 5 landing page</u>.

Most of you will want to start work as a first-year foundation doctor (F1) in August 2025. You will probably have a preference for the part of the country (unit of application UoA) in which you want F1 and F2 to take place. In order to achieve these goals you will need to make an application through Oriel, the foundation programme application system.

The London Foundation School is your local foundation school, part of Health Education England but closely tied to the Medical School. It is your portal of entry into Foundation Application and the first place to send enquiries. Enquiries should be submitted through their online support webportal: https://lasepgmdesupport.hee.nhs.uk/support/home.

Very early in the year, if you have not already done so, you will need to decide whether you want to apply for a Specialised foundation programme (SFP) - previously known as the Academic Foundation Programme (AFP). There are over 7000 F1 posts in the UK and of these about 450 are SFPs - so the competition is often but not universally fierce. Most of these programmes allow 4 months in the F2 year for research, education or management.

Dates and exact procedures are not duplicated here but are found in The UKFP/SFP 2025 Applicants' Handbook on the UKFPO website (http://www.foundationprogramme.nhs.uk/). **CRITICALLY the deadline for application submissions is absolutely firm**. If you miss it, even by seconds, you will have to wait until the following year to apply. This does happen from time to time and we have never had any success in appealing.

## **FINALS 2025**

Most students pass finals but this is at least partially because most candidates work hard to prepare for it. Some of the questions are set nationally by the Medical Schools Council Assessment Alliance and are taken by all medical students in your year up and down the country. There is a four-hour written MCQ (5B), sat over two days, and an OSCE (5D) which itself is divided into different parts. The PSA is part 5C. More information is available in the scheme for assessment within the MBBS Assessments and Progression Handbook and will be presented by the examiners and assessment team.

Students who are unsuccessful at their first attempt will be advised to sacrifice some or all of their elective in order to attend an academic support programme in preparation for the re-sit exams in the first week of June. These students will also be excused the requirement to submit an elective report.

The written MCQ 5B & OSCE 5D exams will take place during the Finals period, running Monday 3<sup>rd</sup> March to Friday 28<sup>th</sup> March 2025 (exact dates will be in the Assessments & Progression Handbook). Results are expected to be released via email on the final Thursday of this period but exact details will need to be confirmed nearer the time and may be subject to change. **Do not travel on elective before you have your results**. Trying to counsel unsuccessful candidates over the telephone from halfway around the globe is not conducive to successful support. We run a remediation program to support the students sitting the late summer exam in second week of May 2025 and strongly encourage in person attendance.

#### SSC5B (ELECTIVE) 2025

The period from 31<sup>st</sup> March until 6<sup>th</sup> June as well as having a well-deserved rest from your studies, provides a substantial length of time for you to explore and observe medical practice that is not part of your core curriculum or that you would like to explore in more depth with your medical career in mind. Within this time window we expect you to be engaged in meaningful student selected medical experience for at least 6 weeks and to reflect this length of time in your SSC report which is due for submission on the 30<sup>th</sup> May 2025. Students who are unsuccessful in the final exams, or who have the need to remediate placements from the first half of the year, will be asked to surrender some, or all, their elective to allow them to prepare for the re-sit exams in June. They may also be excused the requirement to submit an elective report.

#### **PREPARATION FOR PRACTICE**

A lecture week in the last week of the course from the 16<sup>th</sup> June, as close to foundation as we can make it, aims to fill the little holes in your knowledge required for foundation practice but not likely to feature in exams; for example the practical tips from junior doctors very recently in your shoes. It features current foundation doctors sharing their experience with you and tips for practice in the common foundation areas.

#### SUMMER AND PRE-EMPLOYMENT SHADOWING PERIOD

Graduation, holiday and move house – all in time for the mandatory (and paid) preemployment shadowing period. Your employing trust will let you know when this starts.

## **TERM DATES 2024-2025**

All dates are inclusive

Term 1	27/08/24 - 20/12/24
Holiday	21/12/24 - 05/01/25
Term 2	06/01/25 - 26/02/25
Finals	03/03/25 - 28/03/25
Term 3	31/03/25 – 20/06/25 Including 6-week elective, 5-week holiday period & PfP lecture week
Holiday	21/06/25 – until Shadowing week prior to commencing F1 (exact time depends on F1 employing trust)

## LEAVE AND ATTENDANCE

The attendance policy applies to year 5 in the same way as it does in the other years but towards the end of the course, attendance is more to do with professionalism than blind compliance – it is expected that you will want to engage with your placements and other teaching events in order to optimise your chance of success at the challenge of the year and to make yourself the best F1 doctor that you can be. If you need to take a planned leave of absence from the course in order to attend a conference for example, please complete a <u>leave request form</u> available on the Year 5 QMPlus front page . It is particularly important that you describe a clear plan for making up the lost learning from your absence. If you are unexpectedly absent, for sickness for example, please let the final year team know. They may ask you to submit a medical certificate. If you miss any sort of assessment you will in addition need to complete an EC form via <u>MySIS</u>.

As well as reducing your chance of success in the year examinations, absence from placements is the most common reason for receiving a failing placement grade and unsanctioned absence is likely to attract concerns about your professionalism.

### **REGISTERING ATTENDANCE ON THE QMUL APP**

Attendance at lectures and placements is monitored via the QMUL App. This is to help avoid lengthy diversions to tap in at card readers or sign registers. If you do not already have the QMUL app installed on your phone then kindly do so before the start of the year.

To use, you simply need to navigate to the app's 'MBBS Placement' tile when you are on site. Click this to check in at the venue (this will work for lecture theatres and Trust sites). The app will only record your attendance when you check in.

If you have any issues with the app you will always have the option to sign in directly with your site administrator. Please be mindful that some placement providers may have additional methods for monitoring attendance and engagement. We would request you to kindly familiarize yourself and engage with these.

## DEADLINES

Professionals take responsibility for successfully complying with the requirements of those various agencies with supervisory functions over their practice. For you these agencies include the GMC, QMUL including FMD, UKFPO and your allocated foundation school. This gives you an obligation to meet deadlines. Of course meeting deadlines is also in your best interest - these are real deadlines which are strictly applied and adhered to without appeal. We will do our best to remind you of these deadlines but keeping them remains your responsibility. You will find the medical school has no power to extend them.

Here are some of the important deadlines. Others are listed elsewhere in this handbook. Please do not miss them!

- **FP application** period opens on Wed 25<sup>th</sup> September and closes at 12 noon, Wed 9<sup>th</sup> October 2024
- Non-UK Elective applications: 9am, Fri 20<sup>th</sup> December 2024 (TBC)
- UK Only Elective applications: 9am, Mon 3rd February 2025 (TBC)
- Elective Documentation submission: Midday, Mon 17<sup>th</sup> February 2025 (TBC)
- Final completed e-Portfolio & submission: 12pm, Wed 26<sup>th</sup> February 2025
- Final elective report & assessment form submission: Midday, Friday 30<sup>th</sup> May 2025

## ASSESSMENT

#### ASSESSMENT AND PROGRESSION HANDBOOK

This provides all the information about your course exams including a more detailed description of the written and practical examinations and the rules you must comply with to pass your clinical placements. It is published on QMPLUS under the assessment tab

#### PEBBLEPAD

PebblePad is the e-portfolio and is used for your clinical placement assessment. It works in the same way as post-graduate assessment. You have a number of forms that must be completed by supervisors and others at various points throughout your placement rotations whilst you are on the wards and in GP. These include feedback from written work, observations of practical procedures, feedback on your professional capabilities and certification of competence in all the practical procedures required of you by the GMC for starting Foundation year and completion of learning activities in Clinical Pharmacology.

The login is at <u>https://v3.pebblepad.co.uk/login/qmul</u> and the year 5 workbook is in your resource section. There is also an app for your phone that will allow you to complete forms even when there is no internet connection. You can then attach them to your workbook later online.

Forms that require a signature from your supervisor can be completed on your own device and they then sign them on screen and this locks the form.

## **COMMUNICATIONS- KEEPING IN TOUCH**

The university (including QMUL registry and the various agents of FMD) will communicate with you in a variety of ways. Formal correspondence will be sent to you by letter, and it is important that you keep you registered personal details and address up to date. However, it is most common for contact to be by QMUL e-mail. You are assigned an e-mail address when you enrol. Please note if you have not enrolled by the deadline your name will not be included in the mailing list. You are strongly advised to check your e-mail account daily and to ensure that junk mail filters and the like do not intercept emails from the QMUL domain.

#### Email

You can access your email account by logging on to a QMUL computer or, if you are not on campus, through the university webmail service at: <u>https://mail.qmul.ac.uk</u>.

If you are experiencing problems with your QMUL email account please contact the computing services helpdesk by email on <u>its-helpdesk@qmul.ac.uk</u> or by phone on 020 7882 8888.

#### QMplus

Information regarding your course will be posted on QMplus virtual learning environment (VLE) which can be accessed via the FMD website. Please ensure you visit the Year 5 area in QMplus on a regular basis at



<u>http://qmplus.qmul.ac.uk/</u>. If you have problems accessing QMplus please contact the computing services helpdesk as above.

#### Text

We also use a text messaging service for urgent updates. If you would like to be included in this service, please ensure your mobile telephone number is included on your student record & updated via SITS if you change it.

#### Special events and meetings

Throughout the year specific meetings are held for all students. Often, information from the meetings will be placed on QMplus however, where possible you should always try to attend the meeting. These meetings usually end in question and answer sessions for students.

## **GMC REGISTRATION**

To start work as an F1 doctor on August 2025, you will need to secure provisional registration with the GMC as well as successfully applying for a license to practice. These two processes are linked; it is possible to be registered without holding a license to practice but not the other way around. The application process is on-line <a href="http://www.gmc-uk.org/doctors/registration">http://www.gmc-uk.org/doctors/registration</a> applications/uk pr p1.asp is a good place to start. Particularly at this time there are unexpected changes to the process and you need to keep in touch and contacts up to date.

Sep 2024	Expect an e-mail from GMC; on receipt, log-in to GMC on- line and update personal details
Between Sept 2024 – April 2025	During your final year the GMC will invite you to activate your GMC Online account and complete a digital identity check.
End April 2025	Expect an e-mail from GMC inviting to you to apply for provisional registration
May 2025	Apply on-line for GMC provisional registration with a license to practice; pay fee (despite money being really tight) any concerns kindly contact student support

#### Full registration

At the end of your F1 year, provided you complete all the requirements of your F1 training programme and secure an outcome 1 in your ARCP, FMD will issue a Certificate of Experience which will allow you to apply - again online - for full registration with the GMC.

## DECLARATIONS

The need to declare criminal punishments, other sanctions and issues of your health which impact on your performance comes to a head in year 5. At the request of the Year 5 Committee a document has been prepared, "disclosure and declaration", to put all the requirements of you in this area in on place. It is available on QMplus/MBBS Year 5/Core documents and summarised here:

- There are four authorities to which you may be required to make declarations regarding your health and about any criminal punishments and behaviour based sanctions you may have acquired:
  - 1. to the Medical School (you will have done this regularly throughout the course),
  - 2. in your application to the Foundation Programme,
  - 3. to your foundation school in the Supporting Trainees Entering Practice document and
  - 4. to the GMC in the declaration of fitness to practice.
- Advice from the student support office regarding issues of health and from the professional capability committee regarding warnings, cautions and convictions may be useful in determining how to handle the other declarations.
- An issue of health or behaviour which has had an impact on your progression through the medical school is very likely to require declaration.
- Consistency between declarations, particularly those on the STEP form (foundation school) and to the GMC in the declaration of fitness to practice, are vital.
- If you remain in doubt, declare it.

## **OCCUPATIONAL HEALTH & BEING FIT FOR CLINICAL PLACEMENTS**

You should have been cleared for clinical placement in your first year of the course and this includes providing copies of all your mandatory vaccinations. However if there has been a change in your health you may need further clearance. If you are unsure if this applies to you should contact the Student Academic and Pastoral Support office.

For the avoidance of doubt, regardless of legislation that applies to the general public, the GMC requires you to comply with local isolation and infection control policies of your placement provider if you suspect you may have a communicable disease including COVID-19.

### STUDENT SURVEYS AND FEEDBACK

It is important that you participate in all surveys of the student experience, because your responses give us the information we need to improve the programme and your learning experience.

Collecting relevant and timely feedback from students on all aspects of their educational experience, then acting upon it as appropriate, is an essential component of our quality improvement processes. Following a root and branch review of student feedback evaluation, led from within the medical school in 2024, we are implementing a series of recommendations starting from the 2024-25 academic cycle. The new approach is typified by greater co-creation between key stakeholders to the process: including students and medical educators across the medical school, Trusts, GP practices or other clinical providers. The aim is improved collaboration around survey design, choice of platform and means of dissemination to improve the response rate and our ability to act on feedback and be seen to be doing so.

Where questionnaires remain the favoured model of collecting feedback, we will move from the JISC platform to Evasys (which is already being successfully used by other QMUL programmes, including in Dentistry). We have identified excellent models of good feedback processes, steered from within the student body (by staff student liaison committee representatives, for example) or, in the clinical environment, innovative uses of communication tools (such as EOLAS within Barts Health). Other means of student feedback evaluation will continue to be explored and adopted, as appropriate, to help supplement ways to collect good quality robust data at key milestones of the student educational journey: such as from SSLCs and focus groups.

### STUDENT/COURSE REPRESENTATIVES

Each year of the programme has four student representatives who provide an important link between the students and the staff on the course.

The overall task of a 'student (course) rep' is to engage with their student peers, seek out their thoughts and views and represent them, particularly at Staff Student Liaison Committee (SSLC) meetings. These meetings are organised to resolve any course-related issues as they arise throughout the year. Course reps work closely with the Students' Union to campaign for change and make things better for students.

In the first few weeks of the course, you will elect four of your peers (who will selfnominate for the position) to perform this role. Pending their election you can raise any issues or concerns with your BLSA senior reps. Further information about this will be circulated to you over the coming days and weeks.

#### SUPPORT SERVICES

There are various sources of support available for you in your final year. We take student support very seriously and everyone in the medical school will do their best to help you achieve the goals of your course.

#### Academic support

Every student in the year is assigned an senior tutor. You can find out who you have been assigned to via IHSE Student Support. If your academic progress seems to be in jeopardy during the year, for example if you fail to perform satisfactorily in a clinical placement or register a low score in one of the in-house Safe Prescribing Examinations, you will be asked to meet a senior tutor to discuss strategies for getting back on track. While most students never meet a senior tutor, you can request a meeting at any time, normally through the final year team in the student office.

#### Pastoral support

As in previous years, the team in the IHSE Student Support Office will be available to provide advice, support and guidance for those of you who experience difficulty with personal matters such as bereavements, personal health and financial crisis. Please contact the student support office via <u>ihse-student-support@qmul.ac.uk</u> to arrange an appointment or for more information about all of the support services available.

#### Academic Advisor

Although there is no specific formal requirement to meet your academic advisor this year they can remain an important source of support and often students will ask them to be their academic reference for foundation & job applications. Please see the Appendix for further details.

#### Academic review group

The senior staff in Year 5 meet six times a year to discuss students' academic progress. Decisions are made on the basis of the feedback from module leads, coursework marks and any concerns voiced by tutors during the year (e.g. regarding poor attendance). Students identified as needing support are referred to the various sources of support described above.

### Other sources of support in Curriculum Delivery Office

Tom (<u>t.schindler@qmul.ac.uk</u>) and Michael (<u>m.j.captain@qmul.ac.uk</u>) in the student office are a very useful point of contact for advice about administrative issues. You are also welcome to contact the head of year, especially if no one else seems to be able to help.

#### Careers service

For those of you who need to compile a curriculum vitae (CV) as part of your application to the SFP, the careers service can provide a CV checking service. The service offers a link careers consultant to provide support. They may be contacted via 020 7882 8533 or <u>http://www.careers.qmul.ac.uk</u>. The careers service can also be an excellent source of guidance for those of you who want assistance in deciding what to do after Foundation, including careers both inside and outside medicine.

## **RAISING CONCERNS**

The GMC standards framework "Promoting excellence: standards for medical education and training" (GMC 2016) instructs UK medical schools amongst others things to ensure that:

"organisations must demonstrate a culture that allows learners  $\dots$  to raise concerns about patient safety"

If you come across arrangements, events or behaviours on placement that lead you to be concerned about a risk to patient safety, you should use the single point of access QMUL Report and Support tool (<u>https://reportandsupport.qmul.ac.uk/</u>). Students are welcome to contact a member of staff to discuss their concern first. This may be a trusted supervisor, one of the senior members of the trust education team, module lead or Head of year.

The Queen Mary Report & Support tool should be used if you experience or witnessed concerning behaviour such as bullying, harassment, hate incidents or gender-based discrimination in relation to any aspect of your university life.

The School endeavours to ensure that all students feel safe when raising concerns and speaking up. The School will support you in every stage of this process, either internally or with other Queen Mary departments such as Advice & Counselling or the Disability & Dyslexia Service.

### MAKING A COMPLAINT

Separate to this process the Queen Mary Student Complaints Policy is for students to raise concerns about matters which affect the quality of a student's learning opportunities or student experience. Poor quality teaching should be can be reported via JISC online student survey feedback and the Staff Student Liaison Committees before it is necessary for a formal complaint to be submitted. The formal policy can be found on the QMUL website. Please refer to http://www.arcs.qmul.ac.uk/students/student-appeals/complaints/

## **PROFESSIONALISM & GOVERNANCE**

During medical school you will constantly hear these words; 'professional behaviour and attitudes', 'professionalism', 'unprofessional conduct', but what does 'being professional' actually mean?

Some people may understand it as dressing smartly for work or doing a good job. For others being professional means having advanced degrees or certificates. Whilst, professionalism encompasses all these definitions, including ensuring your dress is compliant with the NHS dress code while on clinical placements and attending OSCE examinations (Paper D), it also covers much more. As graduate students embarking on a career in healthcare, notions of professionalism and professional conduct are at the heart of everything you do. This will be a topic that you return to consistently in all your modules and clinical placement.

We want to be clear how you can be completely professional in your day-to-day role as students, which will pave the way for you developing a code of conduct as qualified medical doctors, responsible for the careful care of patients and engaged in multidisciplinary team working with junior, senior and peer colleagues.

Professionalism is about being compliant with the requirements of what is expected of a doctor as per GMC's Good Medical Practice. <u>What is Good medical practice - GMC (gmc-uk.org)</u>

Professionalism also requires you take responsibility for your learning to ensure patient safety and engage with MBBS course requirements. All this counts as professionalism which is assessed as part of Paper A and that starts from the first day of your Year 5. You may be contacted if there are "low level concerns". It is our responsibility such concerns are shared with you, and you have the opportunity to discuss these with a senior colleague such as your academic advisor, senior tutor, or a senior academic such as head of student support, Academic lead or head of Year 5, so you are aware of these and have a chance to respond and remediate as required. The intention is to help you reflect and learn from these conversations. However, failure to engage or to learn may result in escalation.

For current & detailed information on Professionalism and Governance please refer to the dedicated QMPlus page: <u>https://qmplus.qmul.ac.uk/course/view.php?id=2569</u>

#### **USE OF SOCIAL MEDIA**

The Faculty of Medicine at Queen Mary University of London are fully aware of the widespread use of social media by both staff and students. Many students are already connected to popular sites such as Facebook, YouTube, Instagram and X, formerly Twitter.

Students may connect to work and study via online learning forums, blogs and shared email lists. These are likely to be accessed via smartphones, personal computers or the campus computers.

There are huge benefits to using social media sites for research, networking and professional reasons. The faculty understands students will benefit from learning together via instant messaging (e.g. WhatsApp) or online forums

The faculty expects MBBS students to abide by the General Medical Council principles, clearly laid out in the document <u>Achieving good medical practice: guidance for</u> <u>medical students</u>. This document, updated in January 2024, sets out the standards expected of you – both inside and outside medical school – and shows how the principles and values of Good medical practice apply to you as a student. Understanding how it applies now and in your career will help you be a good student and, in the future, a good doctor.

<u>Using social media as a medical professional</u> builds on Good medical practice to provide more detail on our expectations of medical professionals in this area. The guidance covers five main areas:

- What we mean by social media
- Maintaining public trust
- Being honest and trustworthy in your communications
- Behaving professionally and maintaining boundaries
- Respecting patient confidentiality, privacy and dignity

The medical school has also developed its own social media guidance for students, in collaboration with students, available here: <a href="https://qmplus.qmul.ac.uk/course/view.php?id=2569">https://qmplus.qmul.ac.uk/course/view.php?id=2569</a>

## Privacy settings

It is imperative your review your privacy settings on **all** social media forums you currently use. Protect your own privacy.

Be aware the more personal information you share publicly through social media, the more likely there may be negative consequences.

You may wish to keep Facebook for close family and friends and use other forums such as X (formerly Twitter) or LinkedIn for professional connections with people you may not know. However, this may not stop inappropriate or unintentional sharing of information that may breach confidentiality or reduce trust in your profession.

Students who fail to act to professionally on social media may be referred to their head of year tutor, or, in more serious cases, be required to attend a Professional Capability Committee to investigate their conduct. Any misconduct, once established, may result in concerns having to be recorded.

## **INFECTION CONTROL**

Unsurprisingly this is a 'hot' topic and you will find there is material in both clinical skills teaching and on the wards to help you keep up to date. It has however always been a key skill in which you need to demonstrate competence long before the global pandemic.

Universal Precautions should be applied by all healthcare personnel, and other carers, in the care of patients in community and primary care settings. These basic steps protect everyone and are at the foundations of good medical practice. Adequate supplies of liquid soap, hand rub, towels, gloves and sharps containers should be made available wherever care is delivered, and you and your colleagues will have been educated about standard principles and trained in hand decontamination, the use of protective clothing and the safe disposal of sharps. It is appropriate that you should ask someone for help if the equipment or supplies or information you need to maintain good standards of infection control are not available where you need them.

The setting where you are working as a student will have local policies and protocols and you should familiarise yourself with these, including the dress code in clinical areas.

The recommendations below are taken from: NICE Infection Control, Prevention of healthcare-associated infections in primary and community care.

## Hand Hygiene

- 1. Hands must be decontaminated immediately before each and every episode of direct patient contact or care and after any activity or contact that could potentially result in hands becoming contaminated.
- 2. Hands that are visibly soiled, or potentially grossly contaminated with dirt or organic material, must be washed with liquid soap and water.
- 3. Hands must be decontaminated, preferably with an alcohol-based hand rub unless hands are visibly soiled, between caring for different patients and between different care activities for the same patient.
- 4. Before regular hand decontamination begins, all wrist and ideally hand jewellery should be removed. Cuts and abrasions must be covered with waterproof dressings. Fingernails should be kept short, clean and free from nail polish.
- 5. There are three stages in clinically effective hand decontamination by washing; preparation, washing and rinsing, and drying.
  - a) Wet hands under tepid running water before applying liquid soap or an antimicrobial preparation to all of the surfaces of the hand.
  - b) Rub hands together vigorously for a minimum of 10–15 seconds, paying particular attention to the tips of the fingers, the thumbs and the areas between the fingers, then rinse thoroughly.
  - c) Dry with good quality paper towels.

- 6. When decontaminating hands using an alcohol hand rub, hands should be free from dirt and organic material. The hand rub solution must come into contact with all surfaces of the hand. The hands must be rubbed together vigorously, paying particular attention to the tips of the fingers, the thumbs and the areas between the fingers, until the solution has evaporated and the hands are dry.
- 7. An emollient hand cream should be applied regularly to protect skin from the drying effects of regular hand decontamination. If a particular soap, antimicrobial hand wash or alcohol product causes skin irritation, an occupational health team should be consulted.

## **Use of Personal Protective Equipment**

Selection of protective equipment is based on an assessment of the risk of transmission of micro-organisms to the patient, and the risk of contamination of the healthcare practitioner's clothing and skin by patients' blood, body fluids, secretions or excretions. Gloves and aprons and fluid resistant masks are generally in routine use, with specialist masks, goggles and other more specialised protective clothing for use in particular specialised environments (e.g. theatres, delivery suite) or when recommended in particular clinical circumstances. If in doubt always ask your supervisor which equipment should be used.

## Safe Use and Disposal of Sharps

- 1. Sharps incidents will be avoided by following these rules;
  - a. Do not pass directly from hand to hand,
  - b. Keep handling to a minimum.
  - c. Do not break, bend, or attempt to replace removable cap before use or disposal.
  - d. Always use a new disposal container when one is full to the mark
- 2. Used sharps are discarded at the point of use and by the user into a sharps container ONLY (conforming to UN3291 and BS 7320 standards). Containers in public areas should be safely located (not on the floor). Needle safety devices must be used where there are clear indications that they will provide safer systems of working for healthcare personnel.

### Needlestick Injuries and Body Fluid Splashes

Please follow instructions for specific Trusts:

### Barts Hospital, Royal London

Please follow these Barts Health guidelines:

Sharps/Splash Injury Reporting: During working hours (Monday to Friday 8.30 am-4.30pm) contact immediately.

Health and Wellness Centre 31-43 Ashfield Street E1 020 3594 6609

Needlestick Helpline 020 7377 7449 Out of Hours

Telephone the on-call virologist or attend A&E at RLH.

## **Other Trusts**

If you are at other Trusts please follow local guidelines or ask your Clinical Supervisor.

### CONTACTS

Within Year 5 there are many individuals who are responsible for the planning and delivery of your programme. This year, more so than ever before, you will be working closely with colleagues within the NHS Trusts. On a day to day level, your studies will be administered by the Curriculum Delivery Office overseen by Head of Student Experience Viki Soper as well as Module Leads and associated administrative staff.

A list of staff most directly responsible for Year 5 is shown below. If problems occur during an attachment, try to deal with them at a local level in the first instance. If problems persist, then contact the **Year 5 Lead Administrator Tom Schindler**, Head of Year or relevant Module Lead.

Head of Final Year Dr Sushma Saksena s.saksena@gmul.ac.uk

Head of MBBS Dr Rakesh Patel rakesh.patel@qmul.ac.uk

Year 5 Senior Tutors Dr Julian Shiel j.i.shiel@qmul.ac.uk

Dr Rohini Sabherwal r.sabherwal@qmul.ac.uk

Dr Devina Raval d.raval@gmul.ac.uk

#### Hospital Assistantship 1 Dr Duncan Mitchell (Anaesthetic theme) duncan.mitchell@nhs.net

Hospital Assistantship 2 Dr Geraint Morris

(Emergency Medicine Theme) geraint.morris@nhs.net

#### **General Practice Assistantship** Dr Jenny Blythe j.blythe@qmul.ac.uk

Dr Meera Sood m.sood@qmul.ac.uk

Dr Vidya Mistry vidya.mistry@qmul.ac.uk

#### **General Practice (Administrator)** Mahbuba Yasmin (CBME) <u>m.yasmin@gmul.ac.uk</u>

Final Year Administration Deputy Clinical Operations Manager Tom Schindler t.schindler@qmul.ac.uk

Administrator for Year 5 Michael Captain <u>m.j.captain@gmul.ac.uk</u>

**Clinical Placements Administrator** Adrian Little <u>a.little@qmul.ac.uk</u>

Dr Rajesh Sivaprakasam (Surgical Theme) rajesh.sivaprakasam@nhs.net

#### Clinical Pharmacology and Therapeutics Dr Patricia McGettigan p.mcgettigan@gmul.ac.uk

Dr Vikas Kapil v.kapil@qmul.ac.uk

Dr Ajay Gupta ajay.gupta@qmul.ac.uk



Head of Medical Electives and Student Selected Components (SSC)
Dr Pedro Elston
<u>p.elston@qmul.ac.uk</u>
Dr Nick Fisher
<u>n.fisher@qmul.ac.uk</u>
SSC5A Enquiries (Year 5)
Ryan Walker (Maternity Cover)
ryan.walker@qmul.ac.uk
Adriana Coracini (Maternity Leave)
a.coracini@qmul.ac.uk
SSC5B (/elective) Enquiries
Michael Captain
<u>m.j.captain@qmul.ac.uk</u>
Senior Internal Examiner
ТВС
Deputy Assessment Unit Manager
Kimila Inniss
<u>k.inniss@qmul.ac.uk</u>
Prizes Administrator
Stephanie Wigg
<u>s.wigg@qmul.ac.uk</u> (works Wed & Thur only)

**Governance Manager** Vanessa Thompson v.thompson@gmul.ac.uk

**Student Finance & Bursary Officer** Kate McFarlane k.mcfarlane@gmul.ac.uk

**Head of Student Academic and Pastoral Support** Elliott Reed e.reed@qmul.ac.uk

Nyree Myatt n.myatt@gmul.ac.uk

**Head of Academic Support** 

#### **Curriculum Operations/Clinical Skills**

Noshin Khan n.khan@gmul.ac.uk

**Tuition Fees and Finance queries** Finance Dept - Mile End: 020 7882 3087

**Student Support Manager** Jennifer Ogden j.oqden@qmul.ac.uk

**Student Records Manager** 

**Student Support Office** ihse-student-support@qmul.ac.uk



IHSE Manager Emily Beet e.beet@qmul.ac.uk Clinical Communication and Learning Skills Unit (RBC) (includes BBN course) clinical-communications@qmul.ac.uk

North Central and East London Foundation School General Enquiries: <u>https://lasepgmdesupport.hee.nhs.uk/support/home</u>

Foundation School Director Dr Alice Carter <u>alice.carter@hee.nhs.uk</u>

**QMUL Careers** 020 7882 8533

Clinical Skills Centre Manager (Robin Brook Centre) Ms Yvonne Clay <u>y.clay@qmul.ac.uk</u> 020 7882 2092

Other Useful Contacts Occupational Health (Mile End) gmulstudents@ohworks.co.uk

**NHS Bursaries** 

nhsbsa.SBAccount@nhs.net 0300 330 1345

Advice & Counselling (Mile End) (Including for Tier 4 / Student Visa advice) 020 7882 8700 QMUL IT Services its-helpdesk@qmul.ac.uk 020 7882 8888

Learning Resources & Facilities Manager (inc Turnbull Centre) Mr Steve Moore <u>s.moore@qmul.ac.uk</u> 020 7882 2216

Other Useful Contacts Graduation Queries-Events Office-Mile End graduation@qmul.ac.uk

GMC gmc@gmc-uk.org 0161 923 6602



HOSPITAL CONTACTS	
Barts Hospital & The Royal London Ho	spital (Barts Health)
Dr Ania Richardson	Gurleen Virk
Associate Dean for Education	Medical Education Manager
<u>ania.richardson@nhs.net</u>	<u>gurleen.virk@nhs.net</u>
	020 7363 9256
Calabaataa	
<b>Colchester</b> Dr Cathy Gouveia	Jane Sparrow
Associate Dean-Undergraduate Education	Undergraduate Administrator for Year 5
Catherine.Gouveia@esneft.nhs.uk	Jane.Sparrow@esneft.nhs.uk
<u>edenemieroodveid@contereminorda</u>	<u>suncioparion e concramolait</u>
	Sarah Beaumont
	Undergraduate Administration Lead
	Sarah.Beaumont@esneft.nhs.uk
	medical.student@esneft.nhs.uk
Princess Alexandra Hospital, Harlow	
Ms Rahat Khan	Claire Moynihan
Undergraduate Clinical Dean	Undergraduate Administrator
rahat.khan@nhs.net	claire.moynihan@nhs.net
	01279 827 299
	Judith Butcher
	Medical Education Manager
	<u>Judith.butcher@nhs.net</u>
Homerton	
Dr John Anderson	Cathy Miles
Associate Dean	Medical Education Manager
j.v.anderson@qmul.ac.uk	<u>cathy.miles2@nhs.uk</u> 020-8510 7747
	020-0310 //4/
	Hifza Malik
	h.malik1@nhs.net
Southend	
Dr Fernando Moro-Azuela	Ms Laura Griffiths
Associate Dean	Undergraduate Administrator
	Undergraduate Administrator laura.griffiths30@nhs.net
Associate Dean	Undergraduate Administrator
Associate Dean	Undergraduate Administrator laura.griffiths30@nhs.net
Associate Dean <u>fernando.moro-azuela@nhs.net</u> Broomfield, Chelmsford Dr Samantha Bradshaw	Undergraduate Administrator laura.griffiths30@nhs.net
Associate Dean fernando.moro-azuela@nhs.net Broomfield, Chelmsford Dr Samantha Bradshaw Undergraduate Clinical Sub-Dean	Undergraduate Administrator laura.griffiths30@nhs.net 01702 385 083
Associate Dean <u>fernando.moro-azuela@nhs.net</u> Broomfield, Chelmsford Dr Samantha Bradshaw	Undergraduate Administrator <u>laura.griffiths30@nhs.net</u> 01702 385 083 Phebe Bailey Medical Student Administrator <u>Phebe.bailey1@nhs.net</u>
Associate Dean <u>fernando.moro-azuela@nhs.net</u> <b>Broomfield, Chelmsford</b> Dr Samantha Bradshaw Undergraduate Clinical Sub-Dean	Undergraduate Administrator <u>laura.griffiths30@nhs.net</u> 01702 385 083 Phebe Bailey Medical Student Administrator
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Associate Dean <u>fernando.moro-azuela@nhs.net</u> <b>Broomfield, Chelmsford</b> Dr Samantha Bradshaw Undergraduate Clinical Sub-Dean	Undergraduate Administrator <u>laura.griffiths30@nhs.net</u> 01702 385 083 Phebe Bailey Medical Student Administrator <u>Phebe.bailey1@nhs.net</u> 01245 516 903 / 514 322 Fiona Mearns
Associate Dean <u>fernando.moro-azuela@nhs.net</u> <b>Broomfield, Chelmsford</b> Dr Samantha Bradshaw Undergraduate Clinical Sub-Dean	Undergraduate Administrator <u>laura.griffiths30@nhs.net</u> 01702 385 083 Phebe Bailey Medical Student Administrator <u>Phebe.bailey1@nhs.net</u> 01245 516 903 / 514 322 Fiona Mearns Medical Student Administrator
Associate Dean <u>fernando.moro-azuela@nhs.net</u> <b>Broomfield, Chelmsford</b> Dr Samantha Bradshaw Undergraduate Clinical Sub-Dean	Undergraduate Administrator <u>laura.griffiths30@nhs.net</u> 01702 385 083 Phebe Bailey Medical Student Administrator <u>Phebe.bailey1@nhs.net</u> 01245 516 903 / 514 322 Fiona Mearns
Associate Dean <u>fernando.moro-azuela@nhs.net</u> <b>Broomfield, Chelmsford</b> Dr Samantha Bradshaw Undergraduate Clinical Sub-Dean	Undergraduate Administrator <u>laura.griffiths30@nhs.net</u> 01702 385 083 Phebe Bailey Medical Student Administrator <u>Phebe.bailey1@nhs.net</u> 01245 516 903 / 514 322 Fiona Mearns Medical Student Administrator
Associate Dean <u>fernando.moro-azuela@nhs.net</u> <b>Broomfield, Chelmsford</b> Dr Samantha Bradshaw Undergraduate Clinical Sub-Dean	Undergraduate Administrator <u>laura.griffiths30@nhs.net</u> 01702 385 083 Phebe Bailey Medical Student Administrator <u>Phebe.bailey1@nhs.net</u> 01245 516 903 / 514 322 Fiona Mearns Medical Student Administrator



## Queen's Hospital, Romford & King George Hospital, Ilford

Dr Gideon Mlawa Director of Medical Education <u>gideon.mlawa@nhs.net</u>

#### Nuala Curtin Undergraduate Co-ordinator nuala.curtin@nhs.net

Susan Coull Medical Education Advisor susan.coull5@nhs.net 01708 435 000 ext 2051

#### Whipps Cross Hospital (Barts Health)

Dr Paramita Cifelli Associate Dean <u>Paramita.Cifelli@bartshealth.nhs.uk</u> Rebecca Fynn Undergraduate Programmes Coordinator <u>rebecca.fynn@nhs.net</u> 020-8539 5522 ext 5201

### Newham (Barts Health)

Dr Vladimir Macavei Associate Dean <u>vladimir.macavei@nhs.net</u> Saira Sanam Undergraduate Co-ordinator saira.sanam@nhs.net 020 3594 2012

## St Barts (Barts Health)

Prof Maralyn Druce Associate Dean for Undergraduates <u>m.r.druce@qmul.ac.uk</u> Mr Sultan Uddin Medical Education Manager sultan.uddin2@nhs.net 020 3765 8143

## APPENDIX 1: MBBS ACADEMIC ADVISOR SCHEME

## How can an Academic Advisor support you during the academic year?

- Academic Advisors will provide holistic academic and pastoral support for the duration of your studies. Conversations with your Academic Advisor will largely revolve around goal setting and discussing any concerns you may have. They may also signpost you to other services where appropriate.
- You will meet 1:1 with your Academic Advisor a minimum of 3 times per year.
- You will meet your Academic Advisor and Med School Family 3 times per year in addition to your 1:1 meeting.
- Your Academic Advisor will have a Med School Family of around 10 students they work with across different year groups for the MBBS Programme. The Med school family can facilitate a greater sense of student community and provide a forum to discuss experiences and advice across year groups.

#### When will I find out who my new Academic Advisor is?

You should be informed of your Academic Advisor in Mid-October 2024 via email.

### When will I meet with my Academic Advisor?

You will be asked to meet with your Academic Advisor twice per term – once individually and once as a group with your Med School Family.

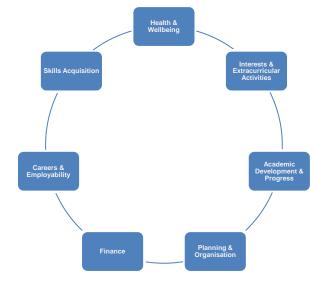
### How can I stay in touch with my Academic Advisor and Med School Family?

You may wish to have an MS Teams chat or WhatsApp group to stay in contact with your peers in your Med School Family. Group meetings with your Academic Advisor and Med School Family will be held online in most circumstances to enable all students to attend irrespective of location. 1:1 meetings may be held in person or online based on mutual convenience.

Students are encouraged to make the most of this opportunity by keeping in contact with their Med School Family and provide peer support to each other.

#### What should I talk to my Academic Advisor about?

Your Academic Advisor should be your first point of contact if you require any support. They are there to talk to you about any issues or concerns. This can include any of



the following:

Your Academic Advisor will do their best to help you with any of these issues or will signpost you to an appropriate service. As always, you can also approach the IHSE Student Support Service if you are experiencing any difficulties – they can be contacted on: <u>ihse-student-support@qmul.ac.uk</u>

## Is it mandatory to attend meetings with my Academic Advisor?

You are expected to engage with your Academic Advisor and Med School Family throughout your studies. Attendance and engagement will be monitored and you may require a reference from your Academic Advisor at points through your academic journey. It is therefore in your best interest to engage fully with this scheme.

## What happens if I cannot get in contact with my Academic Advisor?

Please give all staff reasonable time to respond. However, if you are unable to contact your Academic Advisor, please contact the IHSE Student Support Service on <u>ihse-student-support@qmul.ac.uk</u> and we will assist in ensuring you receive appropriate advice.

### What should I do if I have concerns about my Academic Advisor?

You are encouraged to speak openly to your Academic Advisor about any concerns you have where possible so these can be addressed. Where you don't feel able to do this or you continue to have concerns after speaking to your Academic Advisor then please contact the IHSE Student Support Service for guidance. For more serious concerns you are also encouraged to use the University's <u>Report & Support Tool</u>

#### How does an Academic Advisor differ from a Senior Tutor?

Your Academic Advisor will be your first point of contact for any support needs. Senior Tutors will oversee the Academic Advisor scheme and will be available to discuss more complex academic support issues, such as interruption of studies, maternity support, withdrawal, course transfer etc. Your Academic Advisor may refer you to a Senior Tutor or other support service based on who is best placed to assist.

### Who oversees the Academic Advisor Scheme?

- Senior Tutors will be supervising Academic Advisors with day-to-day issues and can be contacted on <u>smd-senior-tutors@qmul.ac.uk</u>
- MBBS Student Support Leads have overall responsibility for the Academic Advisor Scheme and Senior Tutors. Our MBBS Student Support Leads are:
  - Nyree Myatt (MBBS Years 1-2, GEP) <u>n.myatt@qmul.ac.uk</u>
  - Devina Raval (MBBS Years 3-5) <u>d.raval@qmul.ac.uk</u>
- The IHSE Head of Student Support has overall responsibility for all student support provision within the Institute:
  - Elliott Reed Head of Student Support <u>e.reed@qmul.ac.uk</u>