



THE UNIVERSITY  
*of* EDINBURGH

# Introduction to the Edinburgh MBChB



**MF / IL**

Clinical Educator Programme Tutor

**Co-facilitator**

Title

# Learning objectives

By the end of this session we hope you will be able to:

- Describe how students are taught, assessed and supported within the Edinburgh MBChB
- Explain where you and your learners are positioned within this bigger picture

What are **your** questions?

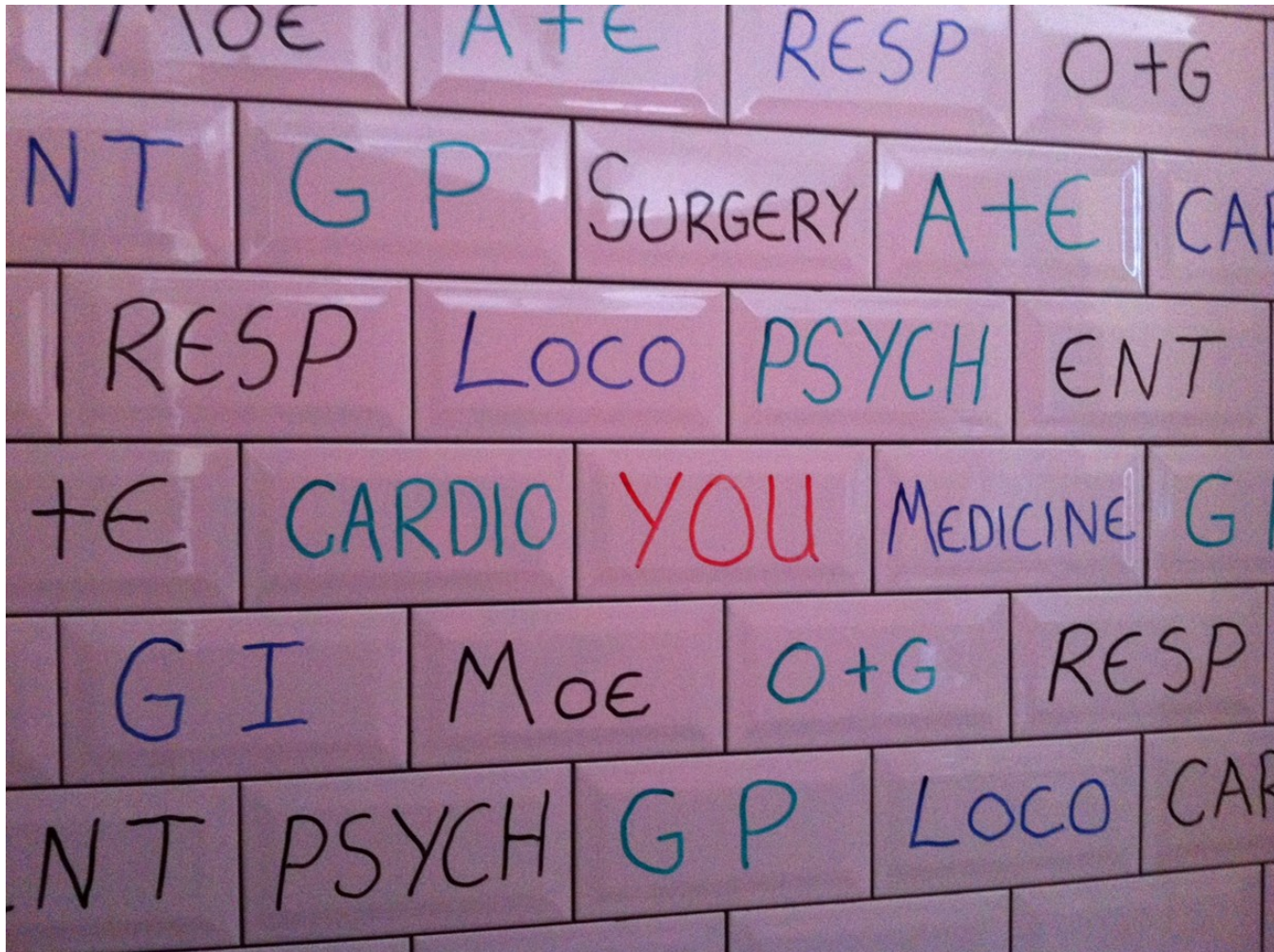


# These were mine!

- What is the curriculum?
- What is 'EEMeC'?
- What do students do in each year of study?
- What are 'Learning Outcomes'?
- What are 'Programme Themes'?
- How are students assessed and how do they get feedback?
- What is the student experience?
- How are students supported?



What really matters is where YOU  
and your students fit in



# Over to you...

For **3 minutes** in pairs:

Reflect on your own undergraduate training and share your experiences.

What form did your training take?

What did you enjoy most and least? Why?

What do we mean by  
'curriculum'?

# The curriculum is...

*“a sophisticated blend of educational strategies, course content, learning outcomes, educational experiences, assessment, the educational environment and the individual student’s learning style, personal timetable and programme of work.”*

Harden, R.M. (2001)

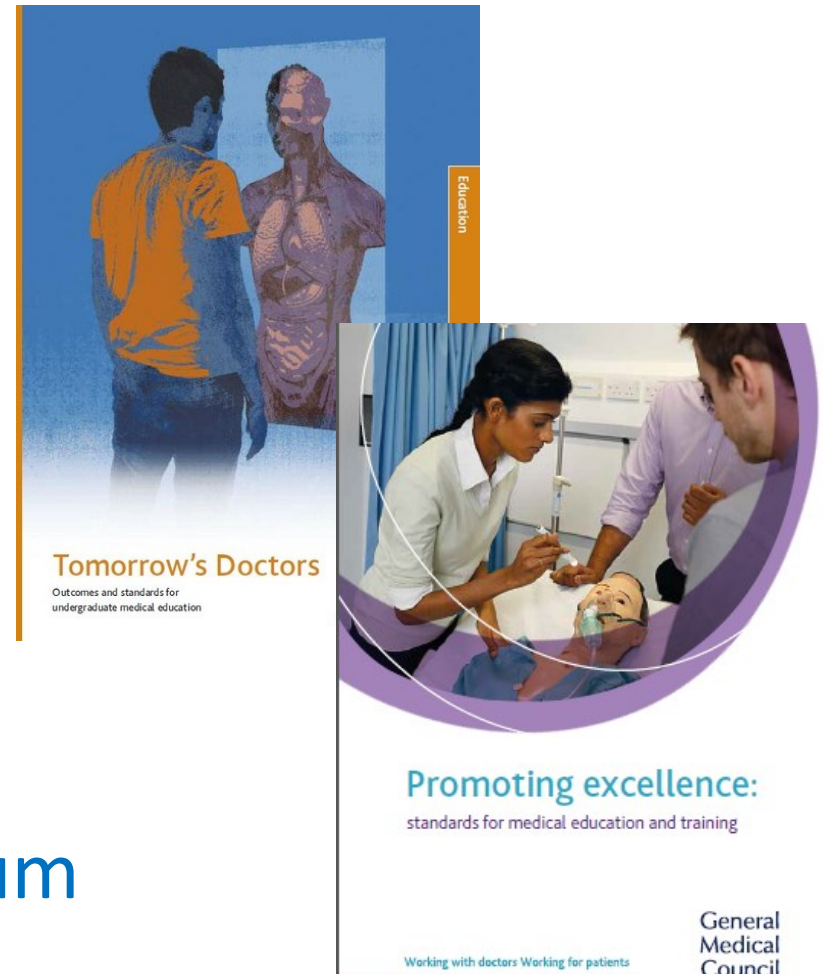


# The Edinburgh MBChB

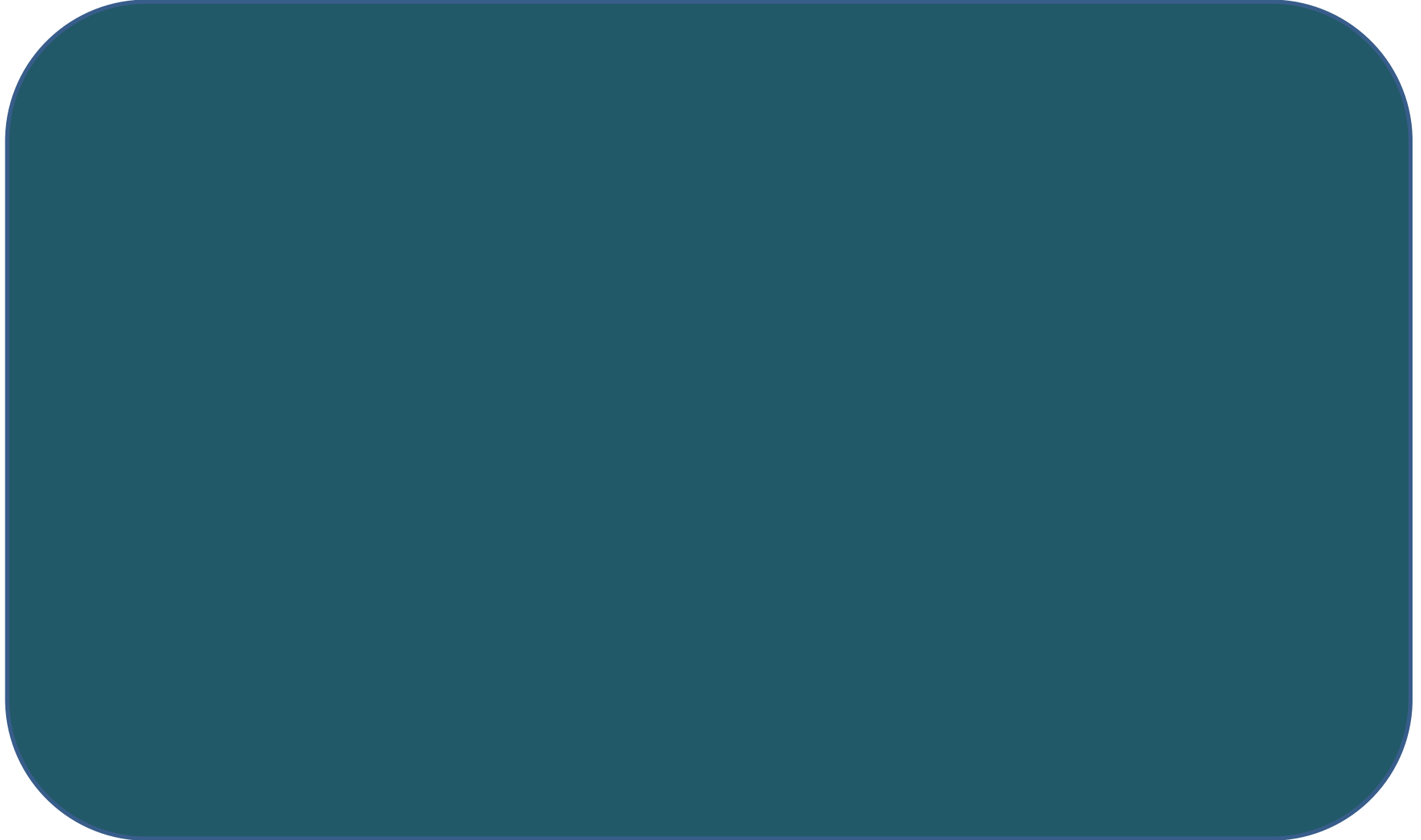
Draws on GMC:

“Tomorrow’s Doctors”  
“Promoting Excellence”

Outcomes based curriculum



# Overall degree outcome



# 12 Programme Themes

- 01 Biomedical Sciences
  - 02 Psychological Aspects of Medicine
  - 03 Social Sciences and Public Health
  - 04 Evidence-based Medicine and Research
- 

Doctor as a  
scholar and  
scientist

- 05 The Consultation
  - 06 Presentation, Diagnosis and Management
  - 7 Clinical Communication
  - 8 Emergency Care, Clinical and Resuscitation Skills
  - 9 Clinical Pharmacology and Therapeutics
  - 10 Medical Informatics
- 

- 11 Medical Ethics, Legal and Professional Responsibilities
- 12 Personal Professional Development

Doctor as a  
practitioner

Doctor as a  
professional

12  
Programme  
Themes

*deliver*

12  
Programme  
Outcomes

# Programme Themes: how do they fit in?

Intertwine with structure of MBChB

Provide direction for students

Help students demonstrate meeting TD 2009 criteria

**Are foundation for assessments**




So, where do **you** fit in?

# EEMeC

[eemec](#) [Curriculum](#) [Other info](#) [Contact](#)

[?](#) [Log In](#)

# Undergraduate Medical School

 THE UNIVERSITY of EDINBURGH

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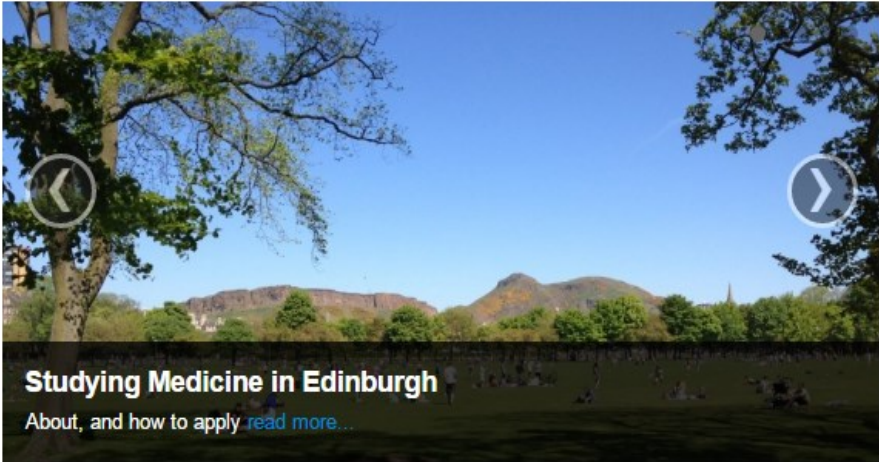
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## Topics in Medical Education


[Risk-taking on electives](#) 23 Aug 2015

[The lecture: why does it survive?](#) 10 Nov 2013

[When should lectures be compulsory?](#) 24 Apr 2013

## Undergraduate News

[Realistic Medicine](#) 01 Feb 2016 by Neil Turner

 Dr Calderwood's first report as Scotland's Chief Medical Officer. She is also an obstetrician at the RIE. ....[read more](#)

[Log In](#) or [Login with EASE](#)



# Over to you...

Work in pairs (of the same specialty if you like):

Log in to EEMeC. Find a module you teach on. Look at its 'core content' and 'learning outcomes'. Determine which aspects of these your teaching is aligned with.

Time: 10 minutes

Let's take a quick fly  
through the six years ...

# Year 1

YEAR 1	SEMESTER 1	SEMESTER 2		
	Fundamentals of Medicine	Cardiovascular	Respiratory	Locomotor
	Health Ethics and Society 1	Health Ethics and Society 2		
		Student Selected Component 1		
	Year 1 Programme Theme Teaching			
	Problem Based Learning			

Year Director: **Jamie Davies**

Year Co-ordinator: **Hedwig Ponjee**

# Year 2

YEAR 2	SEMESTER 1		SEMESTER 2				
	Neuroscience	GI & Liver	Clinical Genetics	Renal & Urology	Science to Clinical Practice	Endo & Diabetes	Science to Clinical Practice
	Introduction to Clinical Practice						
	Student Selected Component 2a		Student Selected Component 2b				
	Year 1 Programme Theme Teaching						
	Problem Based Learning						

Year Director: Ingo Johannessen

Year Co-ordinator: Claire Johnston

# Year 3: 'The Research Year'



Year Director: **Jeremy Hughes**

Year Co-ordinator: **Kate Bickerdike**

# Year 4

YEAR 4	Cardiovascular	GP + Psychiatry	Endocrinology + Diabetes Rheumatology	GI + Liver
	Respiratory	Neurology	Orthopaedics	Infection / Team
	Year 4 Programme Theme Teaching			

Year Director: Karen Fairhurst

Year Co-ordinator: Linda Pollock



# Year 5

YEAR 5	Obstetrics + Gynaecology, GUM	SSC 5a, 5b / Haematology / Oncology / Palliative Care / Breast
	Psychiatry	SSC 5a, 5b / Renal / Urology
	Neurosciences / General Practice	SSC 5a, 5b / Dermatology / ENT / Ophthalmology
	Year 5 Programme Theme Teaching	

Year Director: Colin Duncan

Year Co-ordinator: Judi Bryce

# Year 6

YEAR 6	Surgery	Medicine	FINALS: Knowledge (MCQ) Clinical Exam Portfolio	Assistantship
	Emergency Med / Anaes / Critical Care /	GP		
	Child Life & Health	Medicine of Elderly		SSC 6 (Elective)
	Year 6 Programme Theme Teaching			

Year Director: Alan Jaap

Year Co-ordinator: Jennifer Hill

# Student Selected Component (SSC)

Throughout programme (20%)

Critical thinking, appraisal, team working, time management

Research methods, medical ethics, data analysis, informatics

Diverse and creative

Includes 'Elective'



[simon.riley@ed.ac.uk](mailto:simon.riley@ed.ac.uk)

So, what **really** drives  
learning?

# Assessment



Formative or summative, assessment is stressful.  
Must have purpose and measure exactly what it needs to.

# How are students assessed?

“Medical Schools must have appropriate methods for setting standards in assessments to decide whether students have achieved the *outcomes for graduates*”

TD 2009, 117

Students need to demonstrate competence in **all** the outcomes.





# Assessment and feedback

OSCE

mini CEX

skills examinations

history taking

MCQ

single best answer

portfolio

essay writing

SSCs

reflection

attendance

peer and tutor feedback

problem based learning

e-calc

online exams

case presentations

anatomy practical exam

viva

oral presentations

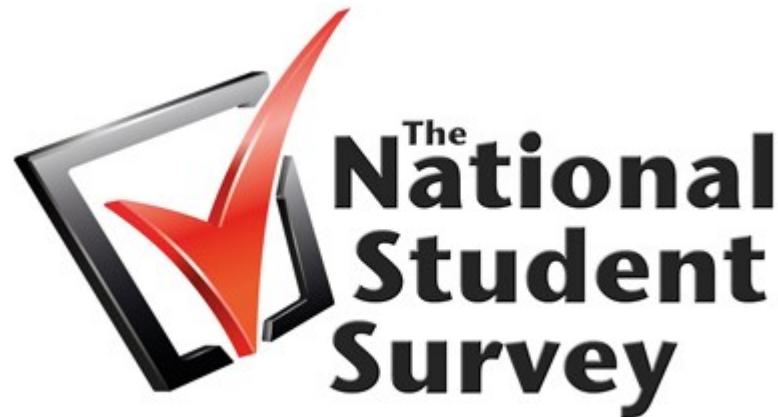
continuous assessment...

What is the student  
experience?

# How do they think we're doing?

YOU SAID .. WE DID

Edinburgh MBChB Key Student Feedback Issues & Response from the Medical School



<http://unistats.direct.gov.uk>

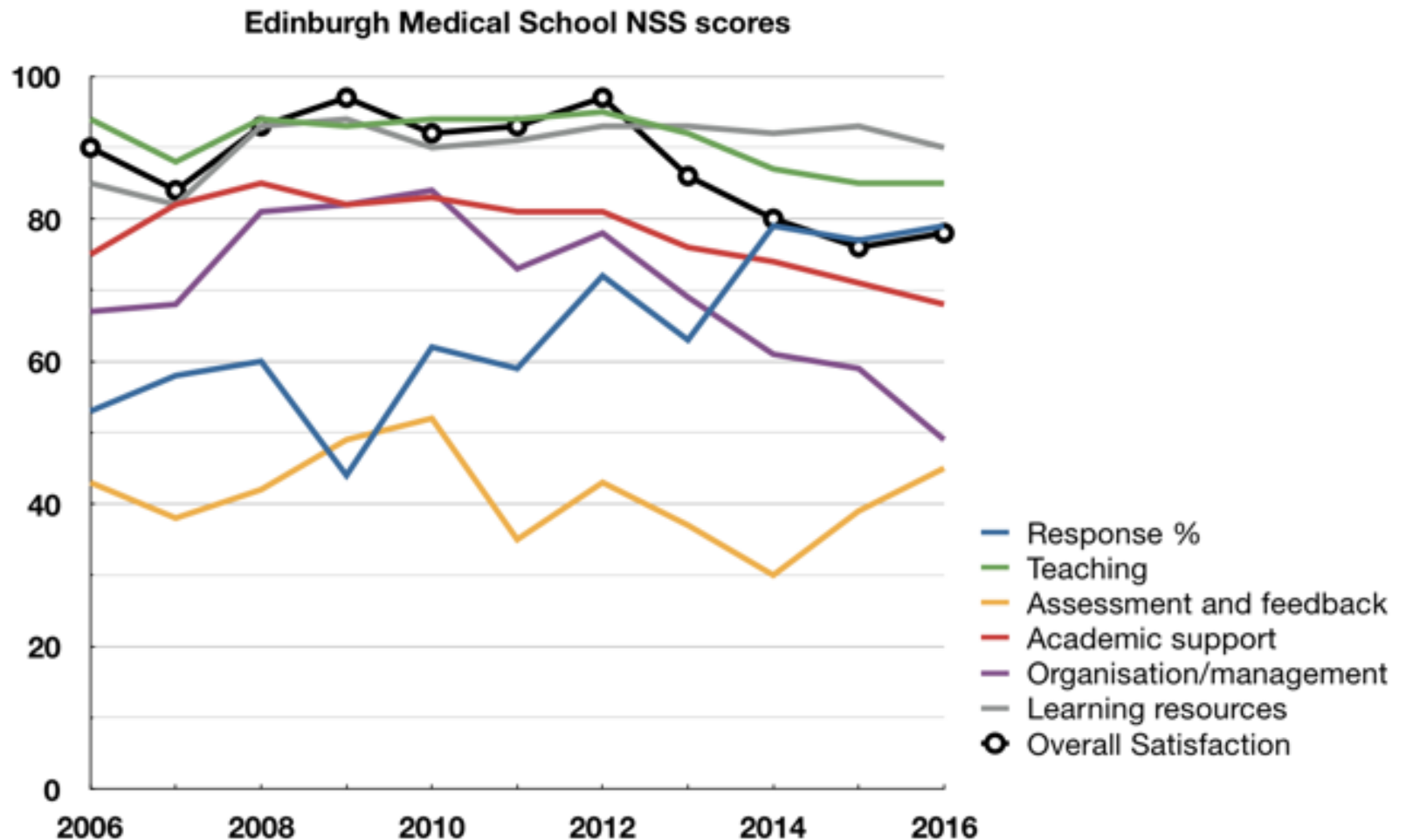
# Over to you

Work together again.

Use EEMeC to find some student feedback for your module or year. You have **3 minutes**.

We will share our thoughts with the group.

# National Student Survey: trends



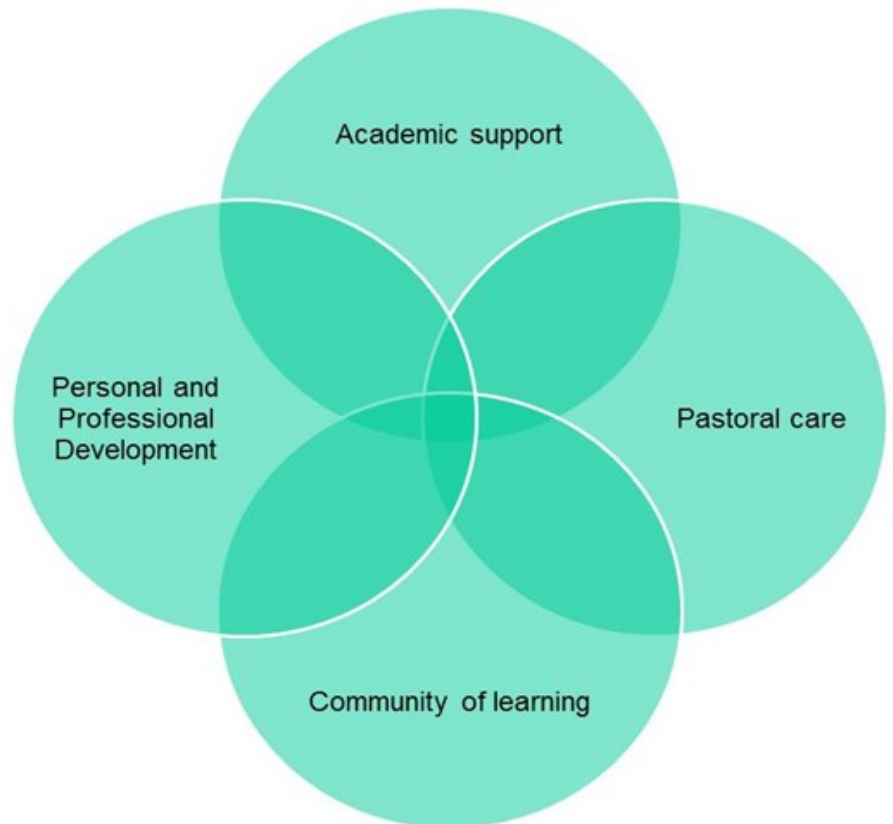
How do we support our  
students?



# Support network

Not just for those who are a 'cause for concern'

- Personal Tutors (PTs)
- Clinical Tutor Associates (CTAs)
- **Student Support Group**
- Student Support Officer
- Year Co-ordinators

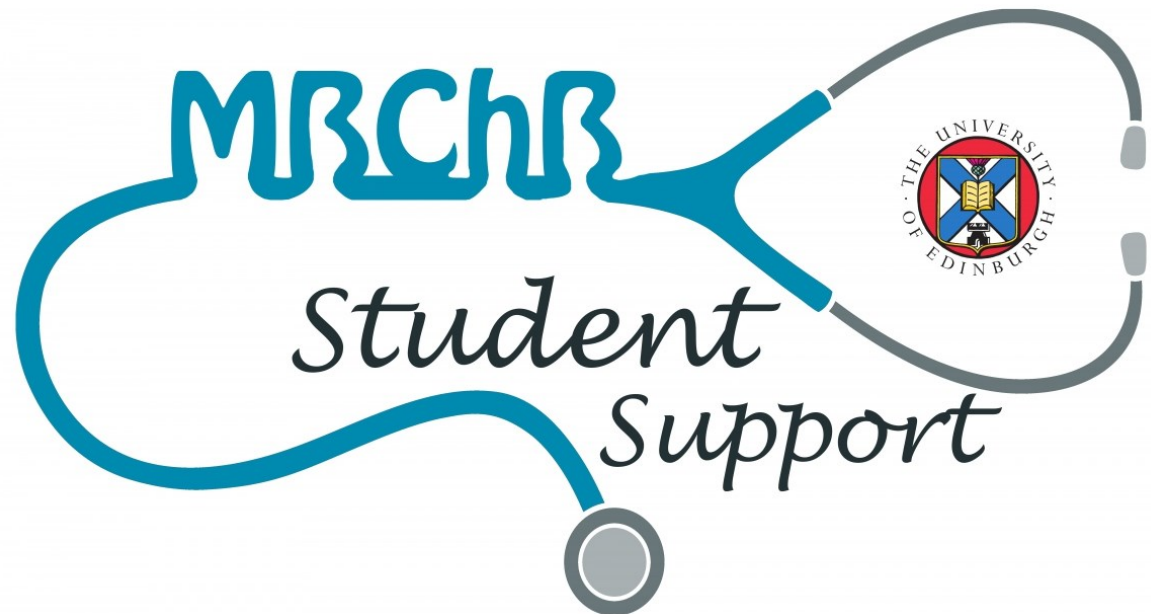


# Student Support Group

Room SU218, 2nd floor Chancellors Building

[MBChBStudentSupport@ed.ac.uk](mailto:MBChBStudentSupport@ed.ac.uk)

0131 242 6509



# Voicing concerns



“Inform students, and those delivering medical education, of their responsibility to raise concerns if they identify risks to patient safety, and provide ways to do this.”

TD, 2009, 28 (e)

# Voicing concerns

## Voicing Concerns Policy

While primarily aimed at MBChB students, this policy is also relevant to staff. It is a supporting document to our [Tell Us](#) page.

Voicing Concerns has been defined as "*raising concerns about misconduct within an organisation*". Whistleblowing usually refers to taking a concern to a higher level because of inadequate local response.

The General Medical Council ([Good Medical Practice \(2013\) 24-25](#)) sees the ability to raise concerns as integral to patient safety, but it really goes beyond this to protect students and staff from unreasonable, unethical, or prejudiced behaviours in an organisation, and to ensure an environment of continuous quality improvement. (Read more from the [GMC on raising a concern](#).)

Medical students are expected to develop an understanding of voicing a concern, why it is at times necessary, and how to do it. As well as issues affecting patient safety directly, this includes worrying issues with fellow students and members of staff. For more info, see [Tell Us](#).

### I've got a concern, what should I do?

MBChB students should usually first discuss it with their Module Organiser/Year Director or Personal Tutor as appropriate. It may be resolved or taken further by them. If not, or if it feels inappropriate to use those routes, [tell us](#). There is more detail on the [Tell Us](#) page about how to raise a concern, and how issues are dealt with.

### Confidentiality, anonymity

The identity of the individual raising the concern will be kept confidential as far as possible, but concerns raised anonymously will only be taken further

#### Quick Links

[Tell us](#)

#### Related Pages

[Fitness to Practise](#)

#### Quick Links

[About EEMeC](#)

[eResources](#)

[Staff info](#)

[Student info](#)

[Tell us](#)

# Summary and key points

- Learning outcomes and programme themes key
- Assessments written, clinical and portfolio
- Student feedback and support important
- Get to know your Year Director, Year Coordinator, Module Organiser, Theme Head
- Get to know EEMeC

# Learning objectives

Do you think you could now ...?

- Describe how students are taught, assessed and supported within the Edinburgh MBChB
- Explain where you and your learners are positioned within this bigger picture

# Take home messages

What has made most impact on **you**?



# Introduction to the Edinburgh MBChB



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