SUMMER STUDENTSHIPS

Information about Summer Studentships in Centre for Medical Education 2018

Application deadline:  Friday 23 February 2018

The Centre for Medical Education provides a unique opportunity for undergraduate students to participate in education research and development projects during the summer months. Each participant will be assigned to a project supervisor. The projects will run for up to eight weeks between June and August and you will work Monday to Friday on a full-time basis.

Students currently enrolled for Medicine in years 1, 2 and 3 are eligible to apply (priority may need to be given to second and third year students if an unusually large number of applications are received.) Each summer studentship typically pays a stipend of £150 per week.

Students from all Universities are welcome to apply and the application process is CURRENTLY OPEN

- Complete the applications form (see below)
- Append your CV (including a reproduction of your academic transcript) to the end of the application form
- Re-name the filed as per the following convention: YourNameStudentshipApplication.doc for example: JohnBrownStudentshipApplication.doc
- Email the document to: g.haire@qub.ac.uk / j.jardine@qub.ac.uk
  Deadline for Applications:  Friday 23 February 2018

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Project Titles and Supervisors for 2018

1 DEVELOPING TEACHING RESOURCES ON DIVERSITY

Supervisor:  Dr Mairead Corrigan

This project aims to develop teaching resources on diversity as part of plans to integrate diversity into the core undergraduate medical curriculum. The definition of diversity that will guide this project is the broad concept that relates to difference that is inclusive of gender, age, sexual orientation, etc (Dogra et al Teaching diversity to medical undergraduates: Curriculum development, delivery and assessment. AMEE GUIDE No. 103. 2015). Diversity is integral to many topics taught in the undergraduate medical curriculum, for example professionalism, leadership, ethics, patient safety, health inequalities, communication skills. Resources will be developed that will incorporate these broad topics as well as resources that are more specific to diversity training.
The objectives of this project are to develop resources to aid the teaching of diversity, for example...

- case studies
- e-learning
- workshops / tutorials
- peer learning
- videoed role-plays

2 MAPPING THE TEACHING OF DIVERSITY IN THE CORE UNDERGRADUATE MEDICAL CURRICULUM

Supervisor: Dr Mairead Corrigan

This project aims to map current teaching on diversity in the undergraduate medical curriculum throughout years 1-5 towards identifying how it can be better integrated. Diversity refers to any difference between individuals and is not restricted to ethnicity or race. As such, it includes gender, sexual orientation, age, disability, etc (Dogra et al Teaching diversity to medical undergraduates: Curriculum development, delivery and assessment. AMEE GUIDE No. 103. 2015). The scope of this mapping exercise will be even more wide-ranging and it will include teaching on issues such as feminism, health inequalities, social class, discrimination, human rights, religious beliefs, homelessness etc. The project objectives will be to:

- identify relevant GMC documents that can be used in the mapping exercise;
- decide on the themes to be mapped;
- map current teaching of these themes throughout years 1-5 using an electronic tool that will facilitate the accurate recording of teaching on topics linked to diversity in its broadest sense.

3 HOW CAN MEDICAL STUDENTS LEARN FROM BEING ACTIVELY INVOLVED IN PATIENT CARE?

Supervisor: Professor Tim Dornan

Theory tells us that supported participation in practice is central to medical students’ learning. There is abundant empirical evidence to support this. It would have been the assumed method of clinical education until recently. And it is the norm in Canada and the Netherlands. Yet concerns about patient safety and the advent of simulation have largely displaced it here. There is a pressing need to rehabilitate practice-based learning in UK undergraduate medical education. Our research group has leading expertise in this. The proposed research will synthesise available evidence to develop recommendations about how best to reintegrate medical students in practice.
4 SCOPING QUALITY IMPROVEMENT (QI) FOR THE NEW UNDERGRADUATE MEDICAL CURRICULUM

Supervisor: Dr Nigel Hart

Within healthcare interest of Quality Improvement (QI) is growing. QI means different things to different people. Batalden and Davidoff sum up most succinctly in their statement that “everyone in healthcare really has two jobs when they come to work every day: to do their work and to improve it”. Following the Francis report Don Berwick published a response for the government: ‘A promise to learn – a commitment to act’. Key among the recommendations was the statement that “The NHS should become a learning organization”. Locally the 2016 Bengoa report suggests a need to “adopt a Continuous Improvement methodology”.

Medical curricula in the 21st Century must therefore endow medical graduates with a skillset beyond the acquisition of a domain of knowledge. Irby et al. suggest a need to provide the opportunity for medical students to “participate authentically in inquiry, innovation & improvement in care”. On the cusp of curriculum review an opportunity exists to scope and propose courses, modules, activities or themes for QI in the new curriculum.

The purpose of this studentship will be to explore the literature and to summarise which initiatives within medical undergraduate courses in other institutions may be adopted and/or adapted to the local context.

5 LEARNING MATERIAL FOR PRACTICAL THERAPEUTICS

Supervisors: Dr Michael Trimble and Dr Mark Harbinson

As part of the review of the Year 3 Internal Medicine attachments, it is planned that the teaching and assessment of Therapeutics will move from SBCP to Internal Medicine. At present the teaching resource for Therapeutics consists of a series of 12 lectures on the Portal. The material in many of these lectures is now out of date. It would be possible to revise and update these lectures but there is a risk that they will quickly become out of date again. What is needed is a resource that is flexible and can be updated easily. A series of online tutorials is proposed. These would have a clinical scenario with a number of questions relating to drug therapy (this should not require updating) accompanied by materials to aid the student. These would include the relevant reference in Lecture Notes on Clinical Pharmacology and Therapeutics – this is available as an e-book through the QUB library, the Student Formulary, and a link to the latest clinical guideline, e.g., SIGN or NICE. Again students could use the resource for personal or group study or it could form the basis for a tutorial on clinical attachment.
6 THE THINKING DOCTOR

Supervisors: Dr Michael Trimble and Dr Mark Harbinson

Building on the successful introduction of Clinical Reasoning as a topic in the development weeks and the work of last year’s Summer student in producing e-learning materials for the Year 3 Internal Medicine module, this project hopes to further develop the theme. It has been suggested that the encounter between doctor and patient requires answers to three questions: What is the problem? What are the possible solutions? and What is the best solution for this patient? To answer the first question requires diagnostic reasoning; the second, knowledge of therapeutic options; and the third involves clinical ethics.

The proposed project is the further development of e-learning materials for Year 3 Medicine. This will involve creation of new clinical scenarios with the potential to focus on the diagnostic reasoning and/or ethical components of the situation (The question of therapeutic options being covered elsewhere in the course.) Once the scenarios have been developed they will be used to build computer-based problem-solving exercises (‘serious games) using an appropriate e-learning software and authoring application, such as, Articulate 360.

7 EVALUATION OF THE IMPACT OF A TRAINING RESOURCE INTENDED TO IMPROVE STUDENT’S MANAGEMENT OF PHYSICALLY-DISABLED PATIENTS PRESENTING WITH COMMON MEDICAL CONDITIONS

Supervisors: Dr David Bell and Dr Vivienne Crawford

Previous in-house research analysed current learning opportunities relating to physical disability in our undergraduate medical curriculum and evaluated the impact on attitudes towards physically-disabled children and young adults. Arising from this, a simulation station was developed, informed by discussion of experiences of good and bad practice identified by physically-disabled young adults during medical consultations. This resource was recorded and is currently made available during second year communication skills tutorials.

Review of a manuscript submitted for publication has recommended further study to quantify the performance of students in the simulation station devised. Specifically therefore we now wish to develop a marking scheme to compare performance in the station of three groups, each of 8-10 students, namely students who had undertaken the station previously (formative practice) relative to those who had accessed the on-line resource instead relative to those who had no exposure to either opportunity prior to undertaking the station (summative) to evaluate the benefit of the station and determine whether the online resource can substitute for ‘live’ practise.

The summer student will therefore work in partnership with the supervisors to address these specific objectives, recruiting up to 30 first year medical students who are available during the summer and who have not previously been exposed to the resource. The summer student would organise the day-to-day logistics of running the role-plays, observing and undertaking peer-assessment of candidate performance using the marking scheme they have devised.
We also plan to administer a structured questionnaire before and after exposure to the resource and the station to capture students’ evaluation of these activities. The summer student would take ownership of administration of the questionnaires and tabulation of the findings.

8 CONTRUCTION OF VIDEO TUTORIALS FOR THE YEAR 4, CANCER STUDIES COURSE – PROJECTS 1 & 2 (2 students)

Supervisor: Dr Gerry Hanna and Dr Seamus McAleer

In Year 4 Cancer Studies, current tutorials address the common cancer sites (e.g. lung, breast cancer, etc...) We are keen to develop learning resources for the Medical Education Portal to provide key information on less common, but clinically important cancer sites (e.g. testicular, melanoma, head and neck and pancreatic cancer). The aim of each project is to compile video tutorials on the oncological management for two of these tumour sites.

The successful student, or students, will be immersed in the clinical team for the relevant disease sites and will attend outpatient clinics, treatment clinics for radiotherapy and chemotherapy and multi-disciplinary meetings, relating to those diseases. Under supervision and with the assistance of Consultants with expertise in those tumour sites, the student will review currently available online resources and clinical guidelines. The output from the studentship will be tutorials for the Medical Education Portal relating to the tumour sites. Specifically, this will comprise didactic material, with sign posting to other relevant online material, and one or two typical case histories to embed the student learning. These resources will accessed by Year 4 students, as part of their self-directed learning.

The student will have in depth exposure to management of the cancer site and will gain experience in researching their topic using online resources and experience in compiling an effective teaching PowerPoint presentation. Finally, the student will become familiar with some of the key principles of medical education.

9 CREATIVITY AND DIGITAL LITERACIES

Supervisor: Ms Clare Thomson

Digital literacies are key skills for all students throughout university and into their professional careers. These are more than just being competent, ‘how to’, in using technology, they involve a more critical view of technology in the learning environment, ‘why, when, what’. This is currently one of the key university projects and this studentship will involve collaborating with the Centre for Educational Development.

There are three main strands of the project. First, to work through Jisc toolkits to identify a baseline level of literacies across a group of medical students and co-design a workshop(s) to support students in digital literacy development based on the tool outputs. Second, work with staff and students within medical education to map out / identify appropriate areas in the curriculum where specific aspects of digital literacy could be embedded. This output will take the form of a report. Finally, produce a suite of appropriate resources/information about digital requirements for the Welcome Week website for students arriving at the medical school, these
resources will be pitched at the right level and with just the right amount of information to ensure students are fully prepared but not overloaded with irrelevant information.

Applications must include:

1. Application Form – [download here](#)
2. CV (including a reproduction of your academic transcript)