

GRADUATE ENTRY MEDICINE | CLINICAL PLACEMENT NEWSLETTER

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Welcome to the Clinical Placements Newsletter

In this issue, as ever you'll find news and updates on clinical placements. We also feature some of the clinical skills facilities available across the health boards and introduce you to some of the staff who work behind the scenes to organise placements. In addition, Drs Jeremy Gasson and Kate Burke introduce themselves as the new Clinical Placement Support Leads; Prof. Ffion Williams reflects on a recent visit to some of the placement providers across Hywel Dda University Health Board; and finally, some of our final year students reflect on their experiences of Year 3.

Don't forget you can access this and an archive of all newsletters here: https://www.swanseaclinicalnewsletter.com/

We appreciate your feedback! Please get in touch if you have any feedback or comments, or if you would like to contribute a reflection: 509248@swansea.ac.uk



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As a Placements team we all work together to ensure that all clinical placements are both valuable and enjoyable learning experiences for students. We liaise closely with clinical partners across Wales in both Primary and Secondary care settings. Here is an update of news since the last Placement Newsletter:

Clinical Apprenticeships (CAs) and Junior Assistantships (JAs)

The big change in academic year 2023/24 was the incorporation of Primary Care placements into clinical apprenticeships in years 1 and 2 of the course. This has gone very well – all students will now have an opportunity to spend at least one of the 4 clinical apprenticeships in the first 2 years in Primary Care going forward. Whilst each student may get a different combination of placements and consequently different experiences, the learning outcomes are the same across all placements. Student feedback from the new Primary Care placements has been almost universally excellent and we have also had really good feedback from GP providers, who have commented on the mature and professional approach of Swansea University Medical School students and on their enjoyment of hosting students in GP practices.

Whilst the addition of Primary Care to the Clinical Apprenticeship programme has been an immensely positive development, there have been teething issues, which have now been addressed – mainly related to the management of GEM portal recording of written clerkings from both primary and secondary care sources. Drs Kerrigan and Roberts have been supporting colleagues in Primary care to complete these assessments, and we don't anticipate that any student will have any outstanding assessments because of these issues. There has also been an issue with students being late to complete out of hours on-call requirements. Completion of out of hours on-calls was slightly more complicated than previously, as students are generally not able to complete on calls out of hours whilst in primary care placements.

Nevertheless, the majority of students got both their assessment and on-call requirements completed in good time, and all students should be able to complete them by the relevant deadlines. As a placements team we have had a comprehensive review of these requirements with Prof McKeegan and have made a number of changes for next academic year to take account of these challenges, and in response to student feedback (see section on "Changes to Workplace-Based Assessments/On-calls for 2024/25" below).

BMA Industrial Action did cause some disruption to placements, particularly to CA1 and CA3, but undergraduate teams and clinicians worked very hard to try to minimise this disruption and placements opportunities were consequently not significantly reduced; feedback from students was also reassuringly positive.

A small number of concerns were received by the Placements Team about student conduct and dress from healthcare staff members, which were addressed with the students concerned. These were mainly in relation to students not showing interest, and/or using mobile phones, in small group clinical teaching sessions; students taking drinks into clinical areas without asking permission or checking if this was acceptable, and a small number of students not complying with our dress code in secondary care placements. The large majority of students were described as highly professional and mature by clinical colleagues in both primary and secondary care settings. We would remind students of their obligation to adhere to high professional standards as described in the GEM Handbooks and in preplacement lectures at all times.

Accommodation has been an issue with a small number of placements this year particularly in primary care placements and these have been actively addressed by our Leads. We hope that this is a glitch and that issues will be resolved in the new academic year.

Cross-site working has also been a challenge in secondary care placements but with increasing clinician engagement we are optimistic that timetables will require less travelling between sites in future placements.

A large number of complimentary emails and **Student Commendation forms** have been received in relation to students who have performed exceptionally during placements and these have been shared with the relevant students as well as senior Medical School staff.

The placement team is planning to increase and improve feedback sent to clinical teams based on **end-of-placement student evaluations**, in which students name individual professionals who were particularly helpful to them during placements, so that all of those staff members named by students will receive letters of gratitude from us.

The Pathology and Clinical Diagnostics (PCD) Rotational placement in year 2 has gone from strength to strength and has now run for 3 academic years. Student feedback has improved over the years and each department represented in the rotation has refined the placement opportunities and adjusted timetables to take account of students' views.

We were very proud to hear recently that the Microbiology/Infectious Disease placement given a "highly commended" award in the recent Royal College of Pathologists Achievements Awards for 2024 under the leadership of Dr Ed Bevan, our undergraduate lead in Microbiology. We are constantly looking for new placement opportunities and are delighted that in year 2024/25 we will incorporate 2 new 2.5-day placements for a small number of students in Nuclear Medicine and Research and Development settings within Swansea Bay UHB.

Finally, we have been working with undergraduate teams in hospitals across Wales to ensure that **information given to students at induction**, particularly in relation to placement assessments and on-call requirements, is consistent with information we give directly to students, and we have asked undergraduate teams to emphasise the importance of students reading and understanding the placement letters that we send on Canvas prior to the placements.



Left: Dr Ioulia Evangelou, Consultant
Histopathologist Swansea Bay UHB with year 3
students Nikol Kralimarkova, Prash Gharti,
Tommaso Galbiati, Emily Hancock, Heledd Evans
and Joyal Joshy, undertaking the histopathology
placement within the CA4 PCD rotation

Specialty Attachments (SAs) and Senior Student Assistantships (SSAs)

Specialty attachments (SAs) have gone well this year despite the condensed placements of the transitional curriculum in 23/24. The BMA Industrial action gave us challenges and altered students' clinical experiences in some cases, but learning outcomes were still all met.

Overall, the students' feedback across the SAs was excellent and many more individual healthcare professionals were named by students as being particularly helpful to them this year. We also received excellent feedback from the new Hywel Dda Women's Health SA at Glangwili hospital. New Mental Health placements will now be starting in Hywel Dda in September 2024 with a dedicated student lead and teaching fellow to support the placement.

Teaching fellows have figured positively in the feedback and they seem to have made a significant impact on the quality of placements. Undergraduate management teams have also been providing excellent support at all sites.

Simulation training is employed increasingly within placements and this is usually received favourably by students. Our Junior Clinical Faculty leads have provided excellent support and gathered a cohort of Junior Teaching Champions who are interested in boosting their teaching skills.

More teaching fellow posts are planned for the coming academic year with the aid of SIFT funding and we hope to have teaching fellows involved in all the SA specialties.

Negative feedback from students related to the lack of downtime in year 3 has now been addressed and additional SDL days have now been built into all the SAs next year, particularly in Frailty, Child health and Mental Health. Each SA next year will be 5 weeks' duration.

Learning outcomes have been reviewed and rationalised and this has resulted in fewer of them and, with improved signposting, they will be more straightforward for students to achieve.

We have received **excellent feedback overall on the SSA placements this year**.

There were fewer negative comments about overcrowding than last year and also less difficulty experienced in finding an available pharmacist for DOPS. The SSAs appear to have achieved their purpose of preparing our students well for FY1 working.

Leave of absence requests are now processed more quickly than before with a new system introduced in the last year. Students and undergraduate teams appear more aware of the need to remediate for absences within placements rather than having to catch up later. Frequent remediation/feedback committee meetings have also helped to capture absences early and provide timely remediation advice to students.

Kara wearing

Following a concern submitted in the placement feedback, we have clarified that the NHS Dress Code allows staff members and students to wear karas on their forearm in clinical areas. During contact with patients, the kara should be pushed up the forearm arm as far as possible to ensure hand hygiene can still be maintained. Forearms should also be washed if there is a risk of exposure of forearms to blood or body fluids. Some departments where there are specific local strict infection control measures in place will have PPE "cuffs" so that karas can be covered.

New Clinical Support Tutors

Since the last Newsletter, Drs Kate Burke and Jeremy Gasson have taken up their new roles as Student Placement Support Leads for Swansea Bay UHB placements and have bridged that important gap between university-based support services and clinical placements. They have already helped in ensuring that students and clinical colleagues are aware of students who may require additional considerations during their placements, and will help ensure that students understand the possibilities within clinical placements. It is hoped that their role will also help with students placed in other Health Boards too.

Supporting and Informing Clinical Teams

We had several opportunities as a placement team in the last year to take part in events to support and encourage our clinical partners in both primary care and secondary care to teach and support our students, and inform them of the different types of placement and placement requirements. Drs Roberts and Kerrigan have met with GP tutors in termly workshop meetings and Drs Williams, Morris and Prof Banerjee have met with secondary care colleagues at roadshows in Hywel Dda (see separate article by Prof Ffion Williams on this), Medical School away days and a Junior Faculty Development Day. We have also met with individual specialties such as Radiology. These meetings appear to have been well received and we are optimistic that they will help to renew enthusiasm for student teaching as well as raise awareness of the students' placement requirements. We are all keen to attend these meetings to firm-up support amongst clinical colleagues for student teaching/supervision, so if any clinicians reading this know of opportunities such as local education meetings/audit meetings within clinical departments, which we could attend, please do let us know!

Nursing Week

The nursing week generally went well in CA1 but, with the increasing number of students, the organisation of the Nursing week has become extremely challenging for undergraduate teams, particularly as the nursing weeks are all clustered within the same 5-week placement. Nursing placements will therefore change in the coming academic year (2024/25) and will now be removed from CA1. They will now take the form of 3 mandatory LOCS of 8 hours' duration rather than occupying a week withing CA1. These LOCS will require completion within year 1.

Learning Opportunities in the Clinical Setting (LOCS)

In year 1, from September 2024, the total requirement for the year will be 7 LOCS, including the 3 mandatory 8-hour Nursing LOCS mentioned above, and including one mandatory "out of hours" LOCS.

In year 2, 4 LOCS will be required in the year, one of which must be an "out of hours" LOCS.

Changes to Workplace-Based Assessments/On-calls for 2024/25

There will be no requirement for placement-based reflective writing in any clinical placement in 2024/25.

In Year 1, no additional out of hours work will now be required over and above the one mandatory "out of hours" LOCS.

In Year 2 - one out of hours "on call" session is required (in addition to the "out of hours LOCS"). This on call session should be done in a hospital-based specialty in a non-rotational placement ie not in the PCD rotation. The on-call session requires sign-off from the accompanying clinician on GEM Portal. There will be no change to written clerking, RoCS or CBD arrangements.

In all placements, arrangements for compensatory rest following out of hours work will now change to mirror current EWTD/BMA Junior doctors' guidance.

An additional note from our Community Based Learning (CBL) leads

We hope all students entering year 2 enjoyed the last academic year, and from our point of view, especially your placements in primary care. The feedback has been overwhelmingly positive from the blocks and the CBL days. We have been pleased to see this and have been impressed with the level of engagement and enthusiasm you have shown, making the most of the learning opportunities presented to you in primary care. We continue to liaise closely with our practices as we believe strongly in the benefits of teaching in primary care and hope to continue to build on the positive experiences reported. The GP tutors attend our workshops each term and receive periodic practice visits to allow us to keep a close relationship with our practices. We feel we have strong group of GP tutors in practices in and around Swansea as well as across Wales. We are constantly looking to recruit new practices to add to this group. The student feedback from the more distant practices is at least as good as those closer to the Campus.

There a few changes to CBL for the next academic year. There won't be any CBL days in year two but there now will be seven days in year one, as opposed to five. The Junior Assistantships in fourth year will be slightly longer, hopefully allowing you the opportunity to build on your clinical skills and knowledge developed so far. As a team we are happy to be contacted to address any concerns or issues that might arise during your CBL placements.

And finally, a big thank you from us all!

Overall, all the clinical placements have gone very well and we would like to thank all undergraduate teams, GP practices and clinical partners in all the placement sites for their hard work in making these placements as useful and enjoyable as possible for all students. We would also like to thank all our students who also worked hard to make best use of the placements and represented Swansea Medical School so well in all clinical areas.



Swansea University Medical School Clinical Placements Team: Dr Geraint Morris, Lead for Clinical Apprenticeships and Assistantships; Professor Sujoy Banerjee, Lead for Clinical Placements; Dr Lisa Williams, Lead for Specialty Attachments; Dr James Kerrigan, Deputy Community Based Learning (CBL) Lead; Dr Llinos Williams, CBL Lead

Clinical Skills Facilities – Withybush General Hospital

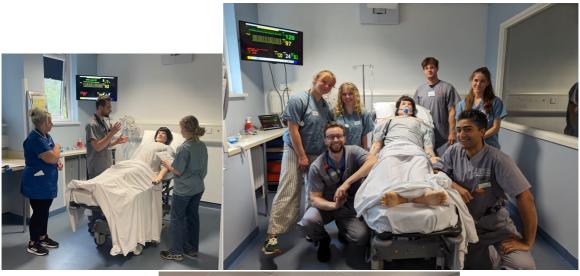
The hospitals across Wales each provide high quality facilities for medical students to hone their clinical skills while on placement and in preparation for exams and clinical practice. This feature introduces some of the people and places you might come across on placement.

Withybush General Hospital (Hywel Dda University Health Board)

Dr Katie Baker, WGH Clinical Teaching Fellow:

The Clinical Skills Lab in the Withybush Hospital Medical Education Department is a busy hub of activity. Every student group has a timetabled session early in their placement to practice clinical skills and familiarise with local equipment. The session includes cannulation, ABG, blood cultures and optional catheterisation to increase their confidence prior to using these skills in clinical practice. Some groups also have a chance to apply their ABCDE assessment skills using our Sim Man 3G. Our recent SSA group helped to facilitate a clinical skills day for sixth-form work observation students. The feedback from the session was overwhelmingly positive and it was a great way for the SSA students to consolidate their own knowledge as well as inspiring the next generation of doctors!

If you're coming to Withybush, get in touch with our Clinical Skills Guru Tracy Sandell – tracy.sandell@wales.nhs.uk





Clinical Skills Facilities – Bronglais General Hospital

Bronglais General Hospital (Hywel Dda University Health Board)

Hello from our Clinical Skills Team at Bronglais Hospital in Aberystwyth! Our friendly team, composed of Dr Megan Thomas - Clinical Teaching Fellow, Oliver Harry - Physician Associate, and Przemyslaw Bargiel - Clinical Skills Coordinator, is small but passionate about training others. In our Medical Education Department, we create welcoming and accessible conditions for developing medical knowledge and perfecting clinical skills.

We offer our students various training sessions on skills such as venepuncture, cannulation, arterial blood gases, blood cultures, male and female catheterisation, subcutaneous/intramuscular injections, suturing, ear/eye examinations and many others. Many manikins are available for the above skills allow trainees to practice whilst on placement. We also have the SimMan Essential manikin, which allows medical trainees to practice essential practical skills such as CPR and bag-valve-mask ventilation, through simulating realistic emergency scenarios to enhance their diagnostic and management skills.

We also utilise these in our 'bleep simulation' training, allowing final year students to practice being oncall.

The training offered is both individual and group-based. There is also the possibility of training with the manikins independently, for those who need to practice. From our experience we understand the importance of not only practicing skills, but creating a friendly and non-judgemental environment to facilitate learning and encourage openness. We strive to do everything in our power to not only teach well but also to provide support.

Moving forward to the next academic year, we will be implementing the use of the skills room out of hours. We hope students will enjoy and appreciate the availability of being able to access the facility in the evenings.

We look forward to welcoming you to Bronglais in the future!



Clinical Skills Facilities – Glangwili General Hospital

Glangwili General Hospital (Hywel Dda University Health Board)

Dr Oliver Allon, Clinical Teaching Fellow (Surgery)

Students at GGH have regular teaching in the sim lab, including weekly sim sessions run by Dr Rob Powell (GP and sim trainer) as well as regular teaching on skills and sim delivered by enthusiastic clinical teaching fellows. The lab is compact, but well stocked with interactive sim man and various manikins for all the basic skills (venepuncture, catherisation etc).

The lab has been undergoing an upgrade to enhance simulation teaching. A large monitor has been installed beside sim man to display images (x-rays etc) in real-time during scenarios, and an integrated viewing room is planned for one of the adjoining rooms. The bedspace is set out as you would expect to find it on the ward, with curtains and equipment trolleys and we take pride in delivering sim that is as realistic as we can to help students feel prepared for starting F1.





Clinical Skills Facilities – Prince Philip Hospital

Prince Philip Hospital (Hywel Dda University Health Board)

Lorraine Sanders, Clinical Skills Co-ordinator, PPH

Our clinical skills lab is located by the Doctors mess and is open 9 – 5pm daily. The lab is used by a range of students and healthcare professionals alike. Various manikins are available to support learning, including a CVC models, chest drain models and LP models. We run regular skill refresher sessions and targeted sessions for our students, including cannulation and venepuncture.

We are also fortunate to enjoy a modern simulation facility at PPH, including a Sim Man Essential. This facility is used to introduce 'real world' scenarios to students in a safe and friendly environment.



Clinical Skills Facilities – Glan Clwyd Hospital

Glan Clwyd Hospital (Betsi Cadwalladr University Health Board)

Jayne McCall, Medical Education, GCH

We are fortunate to have excellent facilities for students, here in Glan Clwyd hospital, North Wales. The skills lab can be booked out between the hours of 9-5, and the skills tutor/ academic doctor is available to deliver training and carry out simulation clinical skills sign offs for the students. Here is the list of equipment available:



We pride ourselves on having a high fidelity SimMan, whereby students can listen to lung/heart sounds, feel for pulses, and check how pupils react to light (pending on the scenario). Simulation sessions are timetabled for the students, and they get the opportunity to do A to E scenarios on acutely unwell patients and cardiac arrest scenarios. The feedback we get is always excellent from the students.

Clinical Skills Facilities – Neath Port Talbot Hospital

NEATH EDUCATION CENTRE

JULY 2024

Facilities for Students

Common Room

The common room is located within Neath Education Centre and can be accessed during opening hours. There are lockers available should students wish to store their personal belongings

Library

The library is located on the second floor of the hospital, to the right of the Education Centre, and is staffed between 8:30am and 4:30pm. PCs are available here, along with quiet study space.

Showers

Showering facilities can be found at Neath and are accessed via a door code. If students wish to use these during placements, please speak to Jill at the Education Centre.



Neath Port Talbot Hospital

Students will get the opportunity to attend a variety of specialities at Neath during their 4 years on the GEM programme. There is the Minor Injuries Unit (MIU), a midwifery-led birth centre, elective orthopaedic and general surgery, inpatient wards for general medicine, ortho-geriatric and stroke patients, a Neuro-Rehabilitation Unit, It also has a urology diagnostic unit, rheumatology day unit, endoscopy and radiology departments and a day surgery unit. The hospital also has a children's assessment unit, a children's centre, and inpatient mental health services. The Wales Fertility Institute is also based at NPT hospital providing patients with consultations and procedures including egg collection and embryo transfer.

Last year saw the opening of three state-of-the-art operating theatres to give the health board the extra capacity needed to accommodate the long waits for orthopaedic and spinal surgery.

Neath Education Centre is located on the second floor of Neath Port Talbot Hospital, and is staffed between 8:30am – 4:30pm.

Within the Education Centre is the main lecture hall and 3 seminar rooms that are used for teaching and training events. You will also find the student common room here with lockers, should you wish to store your personal belongings.



Neath Education Centre

Clinical Skills Facilities – Neath Port Talbot Hospital



Jill Miles, Senior Medical Education Administrator

Jill has been in her role for 10 years and supports students in both undergraduate and postgraduate studies with organising teaching programmes and medical student placements at Neath.

She has built really strong working relationships with the staff at Neath over her career, and in turn they have been very helpful and accommodating for students and their placements.

Jill is always happy to have a catch up with students, and the office door will always be open for a chat.

Clinical Skills Lab

Following student feedback and the desire to practice clinical skills whilst on placement at Neath, a new lab has opened within the Education Centre.

Located at the back of the centre, it is open 9am – 4pm for medical students to practice and help gain confidence in their skills. Alongside the labs at Morriston Education Centre and Singleton Teaching Unit, this new addition to the Medical Education sites will help to accommodate the growing number of students.

Education staff are very keen for students who are attending placement at Neath to start using this new facility in the next academic year, to ensure we are providing the right clinical pratice opportunities.



Clinical Work Observation Programme

This year Neath has had a big involvement with the Clinical Work Observation

Programme, providing opportunities for aspiring medics to observe NHS colleagues
within the clinical settings of wards, theatre and MIU.

65 observation students have been able to join the teams at Neath, and a huge thank you goes out to them for facilitating these student, educating them and putting them at ease during these uniquie opportunities.



An Introduction to the Placement Team

The placement team coordinates all placements for commissioned programs, Pharmacy and GEM (Graduate Entry Medicine) within the Faculty of Medicine, Health, and Life Science. There are key team members for the GEM programme each playing a crucial role in ensuring the effective management and coordination of these placements. Medicine SIFT coordinator – Allison Pavey, Professional Placement Coordinator - Caitlin Jewell, Employability and Placement Assistant – Tim Hunt and Professional Placement Lead - Alex Jones.

The key functions of the team are to Identify and secure placement opportunities with healthcare providers and institutions. Coordinate the scheduling and logistics of student placements while maintaining strong relationships with placement providers to ensure quality and availability.

Conduct evaluations of placement experiences to ensure they meet educational and professional standards. Collect feedback from students and placement providers to assess the quality and effectiveness of placements. Use evaluation data to improve future placement processes and address any issues or areas for improvement. Ensure that evaluations are conducted in a timely and systematic manner, and that findings are reported to relevant stakeholders.

To arrange accommodation for students during their placements, ensuring it is suitable and convenient. Manage contracts and agreements with accommodation providers. Address any accommodation-related issues that arise during the placement period.

Process and manage travel claims submitted by students for expenses incurred during placements. Ensure travel claims are accurately documented and comply with both university and NHS Bursary policies. Provide guidance to students on how to submit travel claims and what expenses are eligible.

The objectives of the team are to ensure the seamless sourcing, coordination, and management of placements to support students' educational and professional development. Conduct thorough evaluations to continuously improve the quality of placement experiences and address any issues promptly. Provide efficient and effective accommodation arrangements to support students during their placements. Facilitate the travel claims process to ensure students are reimbursed for eligible expenses in a timely manner.

Swansea University Medical School Visit to Hywel Dda University Health Board



Above: Dr Nia Williams, Teaching Fellow at PPH, Dr Geraint Morris, Lead for Clinical Apprenticeships and Assistantships, Prof. Sujoy Banerjee, Lead for Clinical Placements, Dr Ben Davies, Consultant Gastroenterologist, PPH

We would not be able to train the doctors of the future on the GEM programme without collaborative and productive working relationships with our Local Education Providers who deliver clinical placements. Swansea GEM is fortunate that students can undertake clinical placements throughout the whole of Wales. In May, the clinical placements team and I, as Head of Gem visited three sites in Hywel Dda University Health Board, to see the facilities and meet the teams.

We know from feedback about your clinical placements in Hywel Dda that the placements get excellent feedback – this was an opportunity for us to experience and hear from the educators and undergraduate managers in Hywel Dda how important the student experience is to them, and how much they enjoy having students with them.

We started our visit at Prince Phillip Llanelli and had productive discussions about how we ensure that with the opportunity for more students to study medicine with us in GEM that we maintain students' excellent experiences in placements. We were given the opportunity to try the simulation game that students can experience there to practice clinical skills and clinical reasoning. As there were no students there to witness our prowess, I will say that we were outstanding gameplayers

Hafan Derwen in Carmarthen was our next stop and hearing about the simulation opportunities there and how hard the team work to provide bespoke and useful placements.

Our final destination was Glangwilli Hospital. There we met with all of Hywel Dda's teaching fellows and discussed how best to work closely with them to provide the best experiences to students on clinical placements – we know from your feedback that teaching fellows can be extremely impactful in this.

We met too many fellows, clinicians and staff from the management team to name individuals' contributions to the day and to clinical placements. I would like to thank each and every person that we met who are involved in undergraduate education in Hywel Dda. It was such an uplifting day, knowing that we have partners in Hywel Dda that care so passionately for GEM students education. I would also like to thank our GEM students – you really are fantastic ambassadors for us and your dedication, professionalism and enthusiasm helps us in securing excellent clinical placements for you.

Prof. Ffion Williams, Head of Graduate Entry Medicine and Chair of Medical Education

New Clinical Placement Support Leads

Introducing Dr Kate Burke and Mr Jeremy Gasson, our newly appointed Clinical Placement Support Leads. Dr Burke and Mr Gasson will be taking responsibility for ensuring that students with additional considerations/needs are supported during their clinical placements.



Hello, my name is Jeremy Gasson and originally I come from Pontypridd. I went to medical school in Leicester and did my training in the Midlands, North East of England and New Zealand. I have been a consultant in O&G for the last 24 years in Swansea. I have been involved in student teaching all of those 24 years. With Professor Kevelighan I am responsible for the Womens' health weeks in year 1 & 2 and for the students when they come on specialty placement in year 3. From April 2024 Dr Kate Burke & I have been appointed to assist in Student Clinical Placement Support. I am looking forward to making placements as enjoyable and rewarding as possible and helping when there are any issues. For the last

10 years I have also been the Associate Dean for the Professional Support Unit in the Medical Deanery in Health Education and Improvement Wales. This role is responsible for supporting all doctors in Wales who are on a GMC approved training program from Foundation all the way through to gaining of CCT and becoming a GP or consultant. I am sure this experience will assist me in supporting our GEM students on placement in the clinical setting. Outside of work I play golf (very average), watch rugby (Ospreys & Wales) and walk our Bernese Mountain / Border collie cross dog Bella who thinks I am a No 1 dog dad! (It must be true as she gave me a mug last father's day).

My name is Kate (Katherine!) Burke and I am a neonatal consultant at the NICU in Singleton Hospital. I am from Liverpool originally, but have been in South Wales since 2012. I did my undergraduate degree in Cambridge, then clinical medicine at Guys, Kings and St Thomas'. I have essentially moved along the M4, doing my initial paediatrics in the Severn Deanery before moving to Cardiff to do a PhD in Genetics in Cardiff. I've done all the 'side roads' in medical training, and consider myself richer for it!



I'm excited about this new role and the breadth and scope it can encompass. South Wales is a fabulous place to learn and train

and I look forward to supporting people in their journey! In my free time I love wandering the Gower, swimming in the sea and cycling!

Final Year GEM students reflect on year 3



Rwby Tucker (Primary Care Academy)

Last year I took part in the Primary Care Academy (PCA), splitting my time between a GP practice in St Clears and Glangwili Hospital. I initially chose the PCA track to have more control over my studies and schedule, while getting an insight into the life of a GP. At the beginning of the year I was excited to start full-time placement but worried about whether I would learn as much in comparison to lectures. Luckily, my doubts were unfounded and I came away from third year with massively increased confidence in both my theoretical knowledge and practical skills.

Going into 3rd year, taking a history was one of my stronger skills which allowed me to really focus on more challenging consultations such as those involving multiple comorbities, learning difficulties and mental health

problems. Instead of feeling wary of these types of consultations, I now enjoy them and the complexities that they can bring. The amount of patient interaction, combined with the 1 to 1 supervision on the PCA helped me to improve my clinical examinations and diagnostic reasoning.

Alongside the medical skills that I developed, being based outside of Swansea gave me the opportunity to explore further west and really embed myself in a community. I think this helped to bridge the gap between simply being a student and being a trainee clinician. Spending more time with patients, both in clinic and on home visits, reinforced the impact that we can have in people's lives. I regularly felt like I was making a difference to people, even if it was just in that specific moment, and was lucky enough to have patient feedback to that effect. I think this was something that the PCA really fostered by allowing me to have extended time with patients and a setting where return visits and follow ups were common.

I am looking forward to final year and the continued patient contact that full-time placement involves.

Samantha King (Specialty track)

Like the majority of my peers, I spent my 3rd year of GEM working my way through no less than 28 specialities and subspecialties in around 40 weeks. Year 3 in secondary care is as much a test of endurance as it is clinical acumen.

While pivoting through so many specialities is at times overwhelming, the spiral curriculum model works. Having time in each specialty allowed me to reinforce key medical concepts. I developed clinical confidence and homed in soft skills like patient communication and team collaboration. These were all invaluable lessons. The most important lesson learned, however, was that of endurance.

There were many times throughout the placement year where I felt I was finally getting the hang of how the team worked and the clinical management of common conditions, only to move on to a completely different speciality the next day. The change at times felt like starting



over. Learning new faces and studying new material was mentally taxing. The feeling of accomplishment after turning in a completed learning objective handbook was quickly swept away as I received our new booklet for the next speciality block. Focusing

Final Year GEM students reflect on year 3

(**Samantha King, cont'd**) on my accomplishments and the realisation of the spiral curriculum's effectiveness, allowed me to progress through each specialty without feeling as overwhelmed by change.

Reflecting on my overall experience of year 3, learning to adapt and enduring constant change was the most valuable lesson I took away from the placement. Overcoming the negative feelings and persevering in an evolving environment are key skills for foundation years and medical training in general. As the year progressed, I focused more on positive outcomes, allowing me to adapt more easily. I will carry this mindset with me throughout my career.

Hope Henry (Speciality track)

Third Year has definitely been my favourite year so far. Whilst it can be really busy, and sometimes stressful, being on placement constantly is a lot better than week upon week of lectures. In terms of how you can make the most out of 3rd year:

Be proactive with your sign offs. Most doctors, especially the Swansea grads, will know that you have sign offs to do and will be happy to help you achieve them. The earlier you get them out of the way, the more time you have to actually enjoy placement and see the things you want to see/are interested in. If you are struggling to get any sign offs, talk to Med Ed. They can usually get you in touch with someone who can help facilitate that sign off and remove some of that stress.



- Offer to help out on the wards/with the clinical teams. In my experience, if you offer to scribe for the juniors they will be a lot more receptive to your sign offs.
- Make the most of placement in times of the year when you haven't got exams. Balancing placement around exam times can be a bit more of a struggle, so make the most out of enjoying placement when you have less on. Take extra opportunities, do some on calls, go to theatre, find some nice Drs to shadow.
- Be kind to yourselves. There can be days where the hospital is chaos, and you may see things which can be upsetting. Always take five minutes at the end of each day to have a little think about how the day has been, and how you have felt, and ask for help if you need it.
- BE ORGANISED! Third Year was a big step up in terms of having to find time to study after some pretty lengthy placement days. If you are organised, and plan your time well, it is doable, but don't neglect your studies. A good thing about third year is you will probably feel the knowledge you already have start to come together, and you will learn a lot from being on placement, but you will still need to study around it too. Make the most of having SDL, it's allocated as SDL for a reason. Studying little and often helped me as it seemed less overwhelming towards exam time.
- Enjoy it! Whilst it can be stressful at times, third year is really fun. You'll get exposure to a whole host of specialties that you may not have come across before, and it is generally a really good year.