# MB ChB Education Conference, Radcliffe, Friday 28th June 2019



		Space 2	Space 12	Space 17		
8.30	Registration and coffee (Lounge) Conference Question: "What can you do to improve the student experience and our NSS scores?". Write your responses on the Conference Question Board in the poster area, lounge.					
9.00	Session 1: Plenary Chair: Prof. Colin Macdougall	Welcome and introduction Dr Catherine Bennett Delivering quality medical education: Metrics and more Prof. Lesley Roberts				
9.30	Session 2: Spoken presentations Chair: Prof. Colin Macdougall	<ul> <li>Student perspectives on medical education</li> <li>Experiences of an interprofessional collaboration in producing educational material on professionalism dilemmas Jenardan Sellathurai, James Bloomfield &amp; Anne-Marie Chilton</li> <li>Student perspectives on barriers to performance for Black &amp; Minority Ethnic graduate-entry medical students: qualitative study Nariell Morrison, Clare Blackburn &amp; Michelle Machado</li> <li>Perspectives of WMS Students and Staff on Resilience and Pastoral Support Wajid Hussain, Isabel Rimmer &amp; Nicholas Hopcroft</li> </ul>				
10.30	Coffee, poster view	ring and conference question (Lounge) - Vote for the best poster	by 14.10; Conference question - add y	our responses		
_	Session 3: Parallel sessions Chairs: Dr Jacqueline Woodman & Dr Paul de Cates	<ul> <li>3.1. Spoken presentations</li> <li>Resuscitation - A Student Led Initiative to Improve CPR Education in Schools         <i>Michael Smith, Philippa Rutter, Hannah Morgan &amp; Anjola Andeniran</i></li> <li>Dynamic Teaching in Medical Education: the use of group based active learning         <i>Madhumitha Rangaraju, Ryan Laloo &amp; Christopher White</i></li> <li>Bringing the Resuscitation for Medical Disciplines (RMD) teaching model to Warwick         <i>Ryan Dee, Christopher Smith &amp; Helen Watkin</i></li> </ul>	<ul> <li>3.2. Workshop</li> <li>Drawing &amp; Doing in Order to Learn: A Framework to Promote Making the Unseen Seen and the Complex Simple Erin Fillmore, Jamie Roebuck &amp; Helen Watkin</li> </ul>	3.3. Workshop  • Lessons Learnt from the Acute Care Speciality Block: Let the Games Begin!  Dhanya Pillai, Amanda O'Keeffe, Nanditha Sathyanarayana, Thomas Baker, Alexandra Tebbett, Arwa Meki		
12.05	Session 4: Plenary	The black & minority ethnic (BME) student attainment gap at WMS: What can we do? Presentation and discussion Dr Lanre Sorinola & Dr Imogen Davies				
13.10 - 14.10	Vote for the best p	oster viewing & conference question (Lounge) oster by 14.10; Conference question - add your responses				



		Space 2	Space 12	Space 17
<u>s</u>	Session 5: Parallel sessions Chair: Dr Chris Marguerie  Student Evaluation: Improving Online Response Rate Thomas Baker, Nanditha Sathyanarayana, Amanda O'Keeffe, Dhanya Pillai, Thomas Moor Padlet: Using a novel digital resource for clinical psychiatry teaching Jessica Blickwedel & Karen Romain Google Sheets: Using "cloud-based architecture" for student- led clinical allocations Nanditha Sathyanarayana, Amanda O'Keeffe, Dhanya Pillai, Thomas Baker		<ul> <li>5.2. Workshop</li> <li>Benefits of a new feedback model: 'The 4 Ps'         Lucy Elliott &amp; Prisca Chimkupete     </li> </ul>	<ul> <li>5.3. Workshop</li> <li>The BAME Student Experience and Attainment Gap         <i>Anil Awesti, Meleisa Ono-George</i>         &amp; Imogen Davies</li> </ul>
15.15	Coffee and poster v	riewing (Lounge)		
(	15 Coffee and poster viewing (Lounge)  15 Session 6: Plenary Chair: Prof. Lesley Roberts  15.45 Key themes from the day Prof. Lesley Roberts  15.55 WMS at 20 - A look back, a look around and a look ahead Prof. Colin Macdougall  16.25 Conference question: Improving the student experience - your views  16.35 Poster prize presentation			



## **Session information**

### Session 1: Plenary. Delivering quality medical education: Metrics and more...

Professor Lesley Roberts, Pro Dean Education and Deputy Dean, Warwick Medical School (WMS)

Satisfaction, spend and staffing, employability data, preparedness, student outcomes, educator expertise... With an increasing array of metrics, alongside a multitude of different approaches to synthesising these to inform different stakeholder groups, this session will explore our current 'quality' framework and ask the question, "to what extent do these metrics align with our understanding of 'quality' in medical education?".

#### Session 2: Spoken presentations. Student perspectives on medical education

9.30	Experiences of an interprofessional collaboration in producing educational material on professionalism dilemmas	Jenardan Sellathurai, James Bloomfield & Anne-Marie Chilton	The Warwick International Higher Education Academy (WIHEA) led an interprofessional collaboration to produce educational materials on professionalism conflicts. Participants completed a post-project evaluation which showed that despite the time constraints, they enjoyed building new relationships whilst learning - creating a more impactful and positive learning experience and environment.
9.50	Student perspectives on barriers to performance for Black & Minority Ethnic graduate-entry medical students: qualitative study	Nariell Morrison, Clare Blackburn & Michelle Machado	This qualitative study aimed to explore graduate-entry MBChB medical students' experiences of undergraduate training in the context of academic underperformance of medical students from ethnic minority backgrounds in one medical school.
10.10	Perspectives of WMS Students and Staff on Resilience and Pastoral Support	Wajid Hussain, Isabel Rimmer & Nicholas Hopcroft	In this session, the findings of a study into student and staff perceptions of resilience will be presented. Semi-structured interviews showed students consider resilience important to academic success, but have mixed feelings due to its relationship to experiencing adversity. Implications for the provision of student pastoral support will be discussed.

### **Session 3: Parallel sessions**

### 3.1. Spoken presentations

	Resuscitation - A Student Led Initiative to Improve CPR Education in Schools	Philippa Rutter,	Resuscitation is a student-led group developed from scratch by students in Warwick Medical School. Their aim is to deliver high quality CPR and first aid sessions in schools in the local area and provide a platform for WMS students to develop their teaching and communication skills.
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11.2	Dynamic Teaching in Medical Education: the use of group based active learning	Madhumitha Rangaraju, Ryan Laloo & Christopher White	Traditional didactic teaching methods are falling out of favour with the inclusion of case based learning into several medical school curriculums. Students respond well to revision sessions based on games and working in teams with healthy competition. Teaching students in different formats was found to help increase confidence in surgical patient presentations and facilitation for knowledge recall.
11.4	Bringing the Resuscitation for Medical Disciplines (RMD) teaching model to Warwick	Ryan Dee, Christopher Smith & Helen Watkin	Discussing how we brought a well-established peer-led Basic Life Support (BLS) and Automated External Defibrillator (AED) training course from Birmingham Medical School to Warwick and how teacher training methods from this course will improve peer teaching at Warwick.

#### 3.2. Workshop: Drawing & Doing in Order to Learn: A Framework to Promote Making the Unseen Seen and the Complex Simple

Erin Fillmore, Jamie Roebuck & Helen Watkin

This workshop will demonstrate the importance of drawing and doing activities in order to learn and solidify knowledge. Attendees will be shown how these activities can be powerful tools in making the unseen seen and the complex simple. Individuals will be given a transferable, step-by-step framework that can be used in any subject to take a concept and turn it into either a Draw-It or Do-It activity.

#### 3.3. Workshop: Lessons Learnt from the Acute Care Speciality Block: Let the Games Begin!

Dhanya Pillai, Amanda O'Keeffe, Nanditha Sathyanarayana, Thomas Baker, Alexandra Tebbett, Arwa Meki

This workshop will initially include a discussion on how the Acute Block Clinical Teaching Fellows have used quality improvement tools e.g. SWOT analyses, fishbone model to analyse our acute care block and feedback. One of the strengths we have found is the varied teaching formats we use. We will focus on the use of gamification and "serious games" we have included into the speciality block such as countdown conundrums and puzzles from Only Connect. This will involve participants trying out the use of games to teach medical students, for example using games to teaching the Diabetic ketoacidosis (DKA) criteria, asthma severity guidelines and so on.

#### **Session 4: Plenary Presentation and discussion**

#### The Black & Minority Ethnic student attainment gap at WMS: What can we do?

Lanre Sorinola, Imogen Davies and the MB ChB Attainment Gap Working Group

This plenary session will introduce the black and minority ethnic (BME) student attainment gap which has been demonstrated in higher education and across medical training, examine our medical school data, explore the contributing factors and actions that are being taken.



#### **Session 5: Parallel sessions**

#### 5.1. Spoken presentations: Using technology to enhance learning and teaching

14.15	Student Evaluation: Improving Online Response Rate	Thomas Baker, Nanditha Sathyanarayana, Amanda O'Keeffe, Dhanya Pillai, Thomas Moor	Within our education department, there was a recent transition from paper to online questionnaires; motivation being both administrative and environmental. This resulted in a reduction in response rates. This study demonstrated that simple interventions such as a weekly reminder sent via the cohort's 'WhatsApp' group can significantly improve response rates
14.35	Padlet: Using a novel digital resource for clinical psychiatry teaching	Jessica Blickwedel & Karen Romain	We explored how students across two medical schools used a new digital software resource, which was set up to enhance learning during their clinical psychiatry teaching blocks.
14.55	Google Sheets: Using "cloud- based architecture" for student-led clinical allocations	Nanditha Sathyanarayana, Amanda O'Keeffe, Dhanya Pillai, Thomas Baker	In the final year, Warwick medical students undertake 'Revision Block'. This includes placements in clinical specialties and attendance at clinical skills workshops. To organise this in an efficient manner, Google Sheets was used to allow students to allocate themselves to meet their learning needs.

### 5.2. Workshop: Benefits of a new feedback model: 'The 4 Ps'

Lucy Elliott & Prisca Chimkupete

This will be a workshop to practice giving feedback to medical students and highlighting ways to ensure feedback given enhances medical student learning. The workshop focusses on the feedback model assisting in giving meaningful feedback.

### 5.3. Workshop: The BAME Student Experience and Attainment Gap

Anil Awesti, Meleisa Ono-George & Imogen Davies

Various reports on Higher Education have shown a clear and substantial difference in the attainment and overall experience of students from ethnic minority backgrounds. This workshop will facilitate conversation about areas of teaching and learning that negatively contributes to BAME experiences, and recommendations for change.

### Session 6: Plenary

### WMS at 20 - A look back, a look around and a look ahead

Prof. Colin Macdougall

WMS is now almost 20. We are an established medical school amongst a pool of schools that will soon be joined by the next phase of newcomers. Traditionally, I have closed the MBChB conference with a look around, taking in the big picture and talking about the (often) challenging environment we work in. Whilst there are still national issues to update you on, I will also take the opportunity to look forward. As WMS turns 20, what do we think it will be like at 40? How will life have changed, what will doctors do and how do we prepare them? Over the next year, we will have much to celebrate, and Coventry City of Culture to prepare for, but we should also re-focus on what sort of school we need to be come for now and the future.



### **Posters**

Please see p. 10 for poster prize voting information and vote for the best poster by the end of lunchtime.

P1.	Student experiences of viva examinations as a tool to assess learning at the end of a placement rotation and as a potential format for final year exam	Jenardan Sellathurai & Mohamed F Mohamud	The 'Care of the Surgical Patient' rotation at UHCW for third year Warwick medical students concludes with a viva examination based on the tutorials and cases students would have seen. Feedback regarding the experience was positive and students recommended it as a form of assessment for finals.
P2.	Why do patients volunteer to take part in medical student final examinations, how is their experience and can it be improved?	Louise Harmer & Prisca Chimkupete	Literature regarding patient experiences when participating in final year medical student examinations is lacking; the most recent paper found through our literature search is from 9 years ago. We explored motivations of volunteers recruited for the same purpose in our trust to investigate changes to patient reasoning over the years.
P3.	Are you paying attention?	Eloise Powell & Helen Jones	Lectures are common practice in University Education. Evidence shows that student concentration declines rapidly after 15 minutes. We trialled the use of 5-minute lecture breaks consisting of an interactive quiz using Kahoot! game based learning platform to improve concentration. Student feedback was collected to assess the effectiveness of this intervention.
P4.	Hesitation to Escalation: Reviewing factors that influence escalation of critically unwell patients by medical students	Dhanya Pillai, Thomas Baker, Amanda O'Keeffe, Arwa Meki & Nanditha Sathyanarayana	During undergraduate training, the practice of escalating concerns in a deteriorating patient is limited. The majority of such practice arises from simulation training. Furthermore, the literature highlights that late involvement of senior decision-makers in an emergency can contribute to poor patient-outcomes. We conducted a questionnaire with final-year medical students at a teaching hospital to explore which factors may influence medical students' escalation of a clinically deteriorating patient.
P5.	Student perspectives on barriers to performance for Black & Minority Ethnic graduate-entry medical students: qualitative study	Nariell Morrison, Clare Blackburn & Michelle Machado	This qualitative study aimed to explore graduate-entry MBChB medical students' experiences of undergraduate training in the context of academic underperformance of medical students from ethnic minority backgrounds in one medical school.
P6.	WHOA! A new reflective model for thinking through professionalism dilemmas	Jordan Moss, Dean Skutela & Anne-Marie Chilton	The WHOA! model of reflection was designed by staff and students as a simple, easy to remember structure to help medical students think through tricky situations. Overall, 77% of students said they would use the model in clinical training, and average rating of usefulness was high.
P7.	Implementation of a new MSK-themed simulated tutorial (COMET) for undergraduate medical students at George Eliot Hospital	Lucy Elliott, Yvonne Chang & Laura Doan	A COMET (Clinically Observed Medical Education Tutorial) is a formative learning event in the style of an OSCE. We implemented a new MSK-themed COMET for Phase III students at GEH assessing initial assessment, prescribing, investigation and communication skills.



			MEDICAL SCHOOL
P8.	Dedicated teaching clinics (DTC) - are they a new way forward in undergraduate medical education?	Mohamed Mohamud, S. Hanmer, M. Pennington & LS Wong	DTC were found to be effective in developing students' clinical skills and therefore, considerations should be made for it to be rolled out more widely in order to benefit future students.
P9.	Is there a difference in the perception of outpatient clinic teaching, between medical students and teachers'? A mixed method study	Bander Dallol & Birgit Fruhstorfer	Increasing pressure from service demands has meant that limitations to the outpatient teaching have continued to surface. Previous studies have looked at satisfaction level of all involved; however no studies have examined whether the limitations are perceived differently between students and teachers in a real life setting.
P10.	What influences medical students in choosing a surgical career?	Madhumitha Rangaraju, Ryan Laloo, Sallu Dawo & Sophie Haughton	Applications for surgical higher training has been declining. The number of junior doctors opting to take breaks in their training has increased dramatically. What do trainee doctors consider in their career preferences? This study aims to describe what factors influence medical students in their career aspirations.
P11.	CEF Grand Round - Meeting the needs of Clinical Education Fellows	Amanda O'Keeffe, D. Pillai, T. Baker & N. Sathyanarayana	Background & Purpose: As a trainee in a hospital department there will be an education agenda involving grand rounds, journal clubs and tutorials. There are also often regional events that bring together a deanery's trainees that facilitate large group learning and development of peer support networks. The same is not the same for Education Fellows who have the same educational and support needs as trainees but limited regular networking opportunities and educational events. Medical Education managers have also been asking us to collaborate with other trusts to better what is offered to students and improve feedback we receive. The aim is to achieve a local and regional network of Clinical Teaching Fellows that meet regularly for continuing professional development, networking and support.
P12.	Teaching medical students non-technical skills through simulation	Nicola McMullan, Ushani Siriwardena, Sandra Navas, Christine Walker	The transition from medical student to junior doctor is challenging, and studies have shown newly qualified doctors feel unprepared for this role. Non-technical skills have been highlighted as a concern, and simulation offers an opportunity to practice these skills in a safe environment.
P13.	Do graduate entry medical students with non- science backgrounds have a greater tolerance of ambiguity during the transition to clinical placements compared to those with a science degree?	Jack Mowatt & Louise Davis	Evidence shows that those with interests in the humanities have a greater tolerance of ambiguity (ToA). This study explores whether previous exposure to humanities at degree level increases a medical students' ToA when facing uncertainty in the clinical phase. Results show arts students have more skills to increase their ToA.
P14.	Turning safeguarding training on its head – a flipped classroom experience	Cornelia Juengst	In order to promote active learning, we replaced the traditional safeguarding lecture for first year medical students with a custom made interactive e-learning module. In this way teaching time was made available for small group work, facilitating deeper learning and application of knowledge to safeguarding scenarios.



#### **Speaker biographies**

**Anil Awesti** is a Senior Teaching Fellow in the Centre for Lifelong Learning, University of Warwick. He co-chairs the Warwick International Higher Education Academy (WIHEA) Anti-Racist Pedagogy and Process in HE Learning Circle which aims to inform institutional deliberations on issues of BAME student experience and attainment, as it relates to teaching and learning, and the creation of inclusive classrooms through the engagement and practice of anti-racism.

**Tom Baker** is currently a clinical teaching fellow at UHCW. He graduated from Warwick Medical School in 2011 and commenced Paediatric training in 2013. He has a particular interest in technology enhanced learning and gamification within medical education.

Catherine Bennett is Academic Lead for Faculty Development for the Warwick MB ChB course and Course Director for the WMS Masters in Medical Education programme. She has a special interest in teacher development and innovative ways to enhance learning and is a member of the Association for the Study of Medical Education (ASME) Educator Development Committee (EDC).

James Bloomfield is a medical student and has a background in psychology and cognitive behavioural therapy. He is interested in understanding how to optimise learning in medical education.

**Yvonne Chang** is a Clinical Education Fellow in Rheumatology at George Eliot Hospital NHS Trust with a special interest in small-group teaching and developing new teaching methods in medical education.

Prisca Chimkupete has been a WMS clinical education fellow at the George Eliot for two years and has an interest in undertaking a career in general practice and medical education.

**Imogen Davies** is Senior Teaching Fellow (Faculty Development) at Warwick Medical School and a member of the WMS Attainment Gap Group and the Warwick International Higher Education Academy (WIHEA) Anti-Racist Pedagogy and Process in HE Learning Circle. Before changing career she was an anaesthetist. She is studying for a PhD in medical education at Queen Mary University of London.

**Ryan Dee** is third year MBChB student and the chair of Resuscitation For Medical Disciplines (RMD) Warwick, a student led initiative that aims to teach all first year students on the MBChB programme Basic Life Support and First Aid skills. He studied his undergraduate degree in physics and has a masters in modelling biological complexity and a PhD in vascular tissue engineering.

**Erin Fillmore** is Associate Professor of Clinical Anatomy and has a special interest in designing novel, effective tools for teaching and in examining why passion and resilience are the secrets to learning success.

**Wajid Hussain**: I am a third year medical student with an interest in researching the importance of resilience in graduate entry medicine. Prior to medical school I was employed as a Physics teacher in a large secondary and sixth form college, where I worked with students to develop their resilience in my role as the Intervention Coordinator.

Cornelia Juengst is a clinical education fellow on the Warwick MB ChB course. She has also worked as a general practitioner (GP) in Birmingham for 10 years.

Colin Macdougall is Head of Medical Education for Warwick Medical School, with his core responsibility being the MBChB. He still spends a day a week as a Consultant Paediatrician with a special interest in allergy. He has been at Warwick Medical School from about 18 months after it opened its doors and has formally held the roles of lead for clinical skills, for phase 2 and as deputy head, for assessments and learning and teaching. He currently chairs the Association for the Study of Medical Education (ASME) Educator Development Committee (EDC).

Nicola McMullan is a paediatric registrar currently working as a simulation fellow at UHCW.



**Mohamed F. Mohamud**, Clinical Teaching Fellow in Surgery & surgical registrar at UHCW, with a keen interest in medical education and ways to develop teaching approaches in surgery.

Nariell Morrison is a Warwick MBChB student who has a special interest in the differential attainment gap, racism within medical education and widening participation.

Jack Mowatt is a third year MBChB student with an interest in medical education and accessibility to medical school.

Sandra Navas is the simulation centre manager at UHCW.

**Meleisa Ono-George** is an Associate Professor in the History Department. She co-chairs the Warwick International Higher Education Academy (WIHEA) Anti-Racist Pedagogy and Process in HE Learning Circle which aims to inform institutional deliberations on issues of BAME student experience and attainment, as it relates to teaching and learning, and the creation of inclusive classrooms through the engagement and practice of anti-racism.

**Dhanya Pillai** is currently a clinical teaching fellow at University Hospitals Coventry and Warwickshire and organises the Acute Care speciality block for Phase 3 students. She graduated from Imperial College London in 2013, completed core medical training in London, and is due to start GP training in the Coventry and Warwickshire area. She is particularly interested in assessment, technology enhanced learning and researching innovative teaching methods.

Eloise Powell is a Clinical Educational Fellow involved in teaching and facilitation of Phase I students.

**Isabel Rimmer**: I am a third year medical student with an interest in resilience in graduate entry medicine. Geography was my first degree and I worked in libraries before becoming a healthcare assistant and commencing my medical studies; my humanities background led to my involvement in the peer led non-scientist teaching at Warwick Medical School.

**Lesley Roberts** is Professor of Medical Education and holds the roles of Pro Dean Education, responsible for the Warwick Medical School education portfolio, and Deputy Dean. Starting academic life as an epidemiologist she has spent over two decades within the education sector undertaking roles across all areas of student experience, pastoral support and course development, delivery and evaluation, but her happiest work life moments occurred in the classroom.

**Nanditha Sathyanarayana** is currently a Clinical Teaching Fellow at University Hospitals Coventry and Warwickshire NHS Trust. She graduated from Nottingham Medical School in 2014, completed core medical training in Coventry and Warwickshire and is due to commence Histopathology training. Her interests are teaching within the clinical setting and assessments.

Jenardan Sellathurai is a medical student and has an interest in optimising professional and personal development during medical school.

Olanrewaju Sorinola is Associate Professor, Phase II Lead and Deputy Head of MB ChB at Warwick Medical School and is a consultant urogynaecologist. His PhD was in medical education and he has published in medical education and urogynaecology as well as being an invited speaker at various national and international conferences. His areas of expertise include evaluation, assessment, faculty development and curriculum development. He is a member of the Academy of Medical Educators (AoME), an Associate Fellow of the International Association for Medical Education, Europe (AMEE) and an active member of AMEE Faculty Development Committee.





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If you lose your password you can re-register at any time with the same phone number and email address. Your previous password will be overwritten.

Your device will be logged out after 24 hours of inactivity and you will be required to login again. The account will be valid for seven days.

**Prayer room:** Space 4 is available for prayer.

Car parking: Please collect a barrier code from Reception before you leave.

## Poster prize voting

You will find three stickers in your pack. Please stick these on the paper beside the poster or posters you would like to vote for. You can allocate these in any way you choose e.g. all three stickers for one poster, one sticker each for three different posters etc.

## **Conference question**

"What can you do to improve the student experience and our NSS scores?"

Please write your responses on the post-it notes in your pack (one idea per post-it; extra post-its are available on the poster boards) and stick your post-its onto the conference question board in the poster display area in the lounge.

The results will be presented at the end of the afternoon.