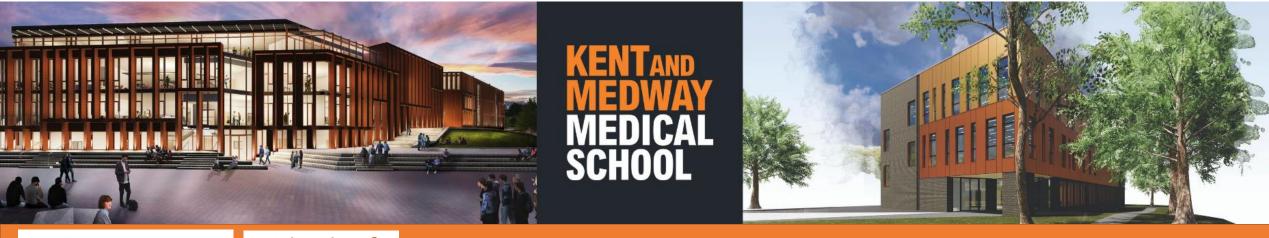


Pandemic Pandemonium and Primary Care Networks: Experiences of establishing primary care placements in a new medical school

Dr Catherine Neden | Dr Adetutu Popoola | Dr Jonty West

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## **Disclosure Statement**

# There are no conflicts of interest for any of the presenters to declare



## Kent and Medway Medical School (KMMS)

KMMS is one of five new medical schools established to support the expansion of the workforce. The school opened in September 2020 with a first cohort of 108 students

The KMMS is a joint venture between Canterbury Christ Church University (CCCU) and the University of Kent. As a new medical school, it is partnered with Brighton and Sussex Medical School

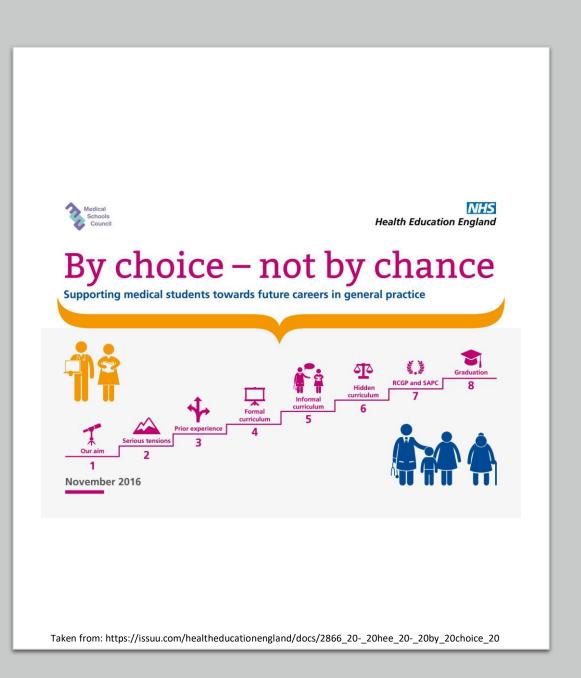




## KMMS mission is to:

- Widen participation in medicine
- Address significant health inequalities in Kent and Medway
- Provide high-quality placements
- Ensure that all our students have significant exposure to primary care, mental health and acute medicine
- Have an innovative curriculum





## Background

#### The KMMS programme features:

- Early clinical placements in the community
- Six weeks in year one
- · Structured as immersion weeks
- Based in Primary Care Networks (PCNs)
- Over the course of the five-year programme,
  28 weeks are in primary care placements

Policy drivers to support recruitment to General Practice:

- GMC outcomes for Graduates 2018
- Wass report 2016



### Logic Model: Evaluability of KMMS Year 1 Primary Care Placements



#### Phase 1:

- Identify the problem(s)
- Determine key programme inputs
- Identify key stakeholders
- Identify programme outputs
   and outcomes
- Determine short, intermediate and long term goals
- Phase one is presented here



#### Phase 2:

 Primary Care Placement evaluation intermediate goals (what do you want to see / measure / change in the intermediate future / aim to revert to as COVID landscape allows etc)



#### Phase 3:

 Primary Care Placement evaluation long term goals (what do you want to see / measure / change in the long term / revert to after COVID etc)



## Setting up the PCN placements

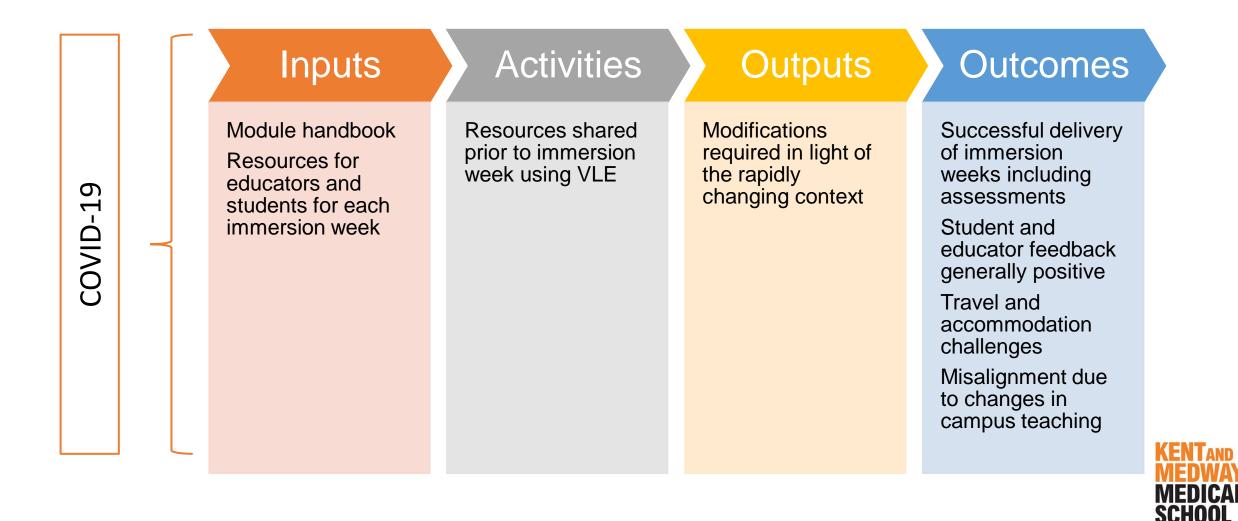
Activities Outputs Outcomes Inputs entity KMMS based 18 PCNs each Generate Contract GP team, THs, delivering six interest and agreed legal PLU, LMC immersion selecting between the weeks to year against agreed universities and Newly one students σ criteria established each not participating **PCNs** Resolving practice within funding queries are the PCN, Establishing a defining lead PCNs contracting responsibilities model acceptable to all parties KENTAND MEDICA

SCHOOL

## PCN contract monitoring

	Inputs	Activities	Outputs	Outcomes
COVID-19	KMMS campus - based team (GP lead, Quality lead, PLU) 18 PCNs - all based on PG training practice	Online quality monitoring visit to each PCN	Sharing of student and educator feedback Opportunities for other programmes	Feedback on faculty preparation materials, IT challenges Community of Practice: Sharing good practice points Timetabling flexibility beneficial







## Impact of Covid 19

# Discussion

- PCN placements offer unique learning environments including early exposure to clinical practice and also to multi-disciplinary working but with legal complexity
- Timetabling tension: Early exposure to clinical practice versus need for OH clearance and placement allocation
- Placements across the whole of Kent and Medway pose logistic challenges for short immersion week placements
- COVID has provided unexpected challenges as well as learning opportunities related to MDT working and communication skills



## Implications

Flexibility is a key factor in the successful implementation of the new programme

With a move to place based learning across networks, learning about contracting and quality assurance models may be transferable to other settings



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## **Contact details**

## catherine.neden@kmms.ac.uk

@caneden

