YEAR 1 CLINICAL CONTACT IN PRIMARY CARE SESSION 1

1st OCTOBER (group A) and 8th OCTOBER 2025 (group B)

Spotlight on the core value of curiosity and the concept of patients' health and wellbeing

Session plan		**Morning timings**	**Afternoon**
Introduction	1hr 10 min	09.00-10.10	14.00-15.10
Patient contact	50 min	10.10-11.00	15.10-16.00
10-minute break			
Debrief and discussion	40 min	11.10 – 11.50	16.10 – 16.50
Close	10 min	11.50 – 12.00	16.50 – 17.00

This first session is all about getting to know your group, and an introduction to general practice. The focus is on curiosity, the excitement of meeting the first patient, thinking about how we talk to patients and the concepts and differing perspectives of health and wellbeing**.** The students will interview their first patient and discuss this and reflect as a group afterwards. The GP teacher guide contains lots of tips on which patients might be good to invite. Most important for this session is that you pick a patient who has a story to tell: someone who is able and happy to talk about their experience of health and healthcare professionals

Please use this plan in conjunction with the GP teacher guide which can be found on our website. Timings can be flexible, it doesn't matter if you don't cover everything in the session plan, and discussions beyond the themes are welcome. Any problems on the day, please email PHC-teaching@bristol.ac.uk or call 0117 455 0031.

Recent central University learning

- Introduction to university life, student societies, wellbeing supports
- A lecture and tutorial to introduce the Primary Care Placement as part of the Effective Consulting course
- First Effective Consulting lab: Collaboration and Curiosity. Working in groups. Concepts of active listening, open and closed questions, non-verbal communication
- Lecture and tutorials: "What is health?", health behaviours and responses to ill-health
- An introduction to medical ethics and law
- They will have been introduced to anatomy terminology, histology, and biochemistry
- Sessions on Fitness to Practice and medical careers
- Learning styles and finding resources/using the library

Aim: to get to know your students and introduce them to the clinical setting and talking to a patient

Objectives. By the end of the session, they will have:

- Been welcomed to the group and prepared for patient contact, including the importance of professional behaviour and patient confidentiality.
- Been introduced to the primary healthcare environment
- Introduced themselves to a patient and participated in an interview about their healthcare experiences.
- Asked an open question
- Observed active listening and considered communication skills
- Considered the patient perspective of *health and wellbeing*
- Considered the concept of *Curiosity* with the consultation
- Discussed the different resources doctors use to answer clinical questions in practice

GP advance preparation

- The lead student should have been in contact with the practice, but you may wish to email the students in advance- see suggestions for this in the GP Teacher guide
- Read this guide: arrange an appropriate patient to meet with the students (in the surgery or at home)

Timings and order of activities are suggested as below but feel free to structure the session as you wish

Introduction and getting to know your students (1hr 10 min) 09.00-10.10 or 14.00-15.10

- Introductions and **icebreakers.** Agree **group rules**
- **Aims** of the clinical contact placement
- Their **learning agenda** – hopes and fears? How do they like to learn? Any particular needs?
- Discuss **professional behaviour** and expectations including confidentiality
- Introduction to talking to patients and think about **emotion in patient encounters** (see below)
- **1:1 chats.** See below for more detailed notes on all these

Walking tour of the practice: show them around and introduce them to the team, discuss list size, area, patient demographics etc. You may wish to do a short walk around the area

Discuss the **learning objectives** for the session and the **plan and timings**

Patient contact (50min) 10.10-11.00 or 15.10-16.00

GP teacher present throughout

All students meet a patient who is happy to talk to the group about their experiences of health and illness. Usually this patient will attend the surgery for the first session but could be visited at home.

- You may wish to brief the students on the patient and consider what questions they might ask as below
- The students should all introduce themselves to the patient by name and role
- GP teacher to start the interview about their life story and interaction with the health care service.
- Encourage the students to ask questions and whilst listening, ask them to consider:
    - What the patients think the term "health" means?
    - Why did the patient first seek help from the healthcare services? Had something changed?
    - What was the patient's interaction with the health care service like? What was positive and what was negative? What could have changed to make it more positive?
    - What aspects of the patient's life support their health and wellbeing? E.g. family/pets/their outlook on life?
    - What do the students think the patient's perspective on their health and wellbeing is? Did anything the patient said or did give any clues about what their perspective is?

Ask the students to observe **communication skills,** for feedback and discussion in the debrief.

- Look for the verbal and non-verbal communication skills used to help the patient tell their story. *What showed you were listening? How did you encourage the patient to talk? Were there any silences? Were there any difficult points in the interview and how did you deal with these?*

Encourage the students to ask their own questions e.g. *Are there any areas of the patient's story the student wants to know more about? What does the patient think makes a good doctor? Do they have any advice for the students during their training?*

10-minute comfort/toilet/stretch/tea break as needed

Debrief and discussion (40min) 11.10 – 11.50 or 16.10 – 16.50

Discuss and reflect on the patient encounter, with reference to the suggested questions above, including communication skills and question types used.

Spotlight on ***curiosity****:* think about questioning in the patient interview and what promotes clinical curiosity? Such as supportive environment, willingness to try, working with peers, listening to doctors, learning to give and receive feedback, learning to feed forward (reflection and learning)

Talk about how you answer clinical questions in practice. Discuss how they/we can **learn from patients** e.g. keep a log, individual/group reflection.

If time permits, you can open the discussion about a patient's perspective on health. For example:

- *How much responsibility do you think a patient has for their own health?*
- *How might the patient's experiences of healthcare affect their experience of being ill?*
- *Should doctors get involved advising patients about diet/exercise/support networks? If so, why? Or why not?*
- *What is the role of the GP in helping patients live with long term conditions?*

How might you, as a future doctor, enable a person with a long-term condition e.g. Parkinson's or chronic lung disease live their lives in a fulfilling and independent way?

Close (10 min) 11.50 – 12.00 or 16.50 – 17.00

- **Take home messages** - share something learned/something that surprised them/a learning goal etc.
- Discuss what worked well/less well - anything to **stop/start/continue** for future sessions?
- Outline plan and set-up for the next session

GP tasks after the session

- Make your own **reflective notes** on the session if you wish (try to keep a record of which students have done home visit/observed consultations).
- **Prepare** for the next session.
- Complete **attendance data** form

Any questions or feedback, contact phc-teaching@bristol.ac.uk

Supporting notes for GP teachers - session 1

Aims for the clinical contact placement in year 1 (from GP Teacher Guide)

- Introduce students to the clinical environment.
- Introduce professionalism and how to behave according to ethical and legal principles.
- Inspire learning from clinical experience and help students contextualize their learning in Foundations of Medicine and in the 7 Case Based Learning cycles of Human Health and Wellbeing.
- Introduce communication skills through observation of doctors and other health care professionals in practice, and through experience speaking to patients.
- Introduce students to broad elements of taking a history, and the approach to a clinical examination
- Enable students to reflect on the patient perspective and wider context of health

- Introduce students to the principles of self-care and resilience

Welcome and icebreakers

This first session sets the stage for all subsequent sessions in general practice, so it is worth spending time getting to know each other and discussing expectations for the sessions. As well as names they may wish to share their preferred pronouns. Welcome them to their first clinical contact and your practice. Tell them a bit about yourself in and out of work, and you may wish to do an ice breaker activity. The aim is to help the group relax and form and foster a positive group atmosphere. They will only recently have become acquainted with each other and may have limited social contact with each other outside of these groups. Make sure you join in too!

Below are some ideas, but feel free to use your own.

- Share facts/questions – e.g. hobbies, favourite foods, home. Or more random – ever met anyone famous, weirdest thing you have ever eaten, what animal would you be and why etc.
- Everyone says two facts about themselves, one true, one false, others guess which is which.
- Ask each team member to introduce one other with one fact they already know about them
- *My name is*…. Ask them to tell you their name they would like to be known by with words that describe them, these words must begin with their initial e.g. My name is Lucy, I love lychees!

Group rules

They will have already considered this in their EC lab so you do not need to go into detail, but if you wish, you can ask the students to suggest rules. As a minimum, remind the students that they must be prepared and ready to start on time, and aim to remain focused throughout. Everyone in the group has a responsibility to contribute and to enable others to. This group should be a safe space to learn, ask questions, try new things, and express opinions. There should be mutual respect and confidentiality (unless serious issues raised). Any challenges to points raised should be aimed at the point not the person. Time out is an option for anyone to have a break if necessary.

Professionalism, **confidentiality, and consent**

The students should all have completed the online pre-learning which includes professionalism, confidentiality, and consent. In addition, they should have completed most, if not all of the mandatory eLFH modules designed to help prepare for clinical practice. After this they will be permitted to see patients independently i.e. home visits and interviews without the GP teacher present. Most students should have done this before their second session; we will let you know if it is not possible for any of your students to do this at this stage.

The students are referred to *Outcomes for Graduates 2020* from the GMC. It states that "*Newly qualified doctors must behave according to ethical and professional principles*". Understanding what this means is one of the aims of this course so please refer to this as appropriate during your teaching. This includes:

- Treating all patients with respect (including respecting confidentiality)
- Treating all staff and colleagues with respect
- Attending all teaching on time and adhering to the clinical dress code
- Being honest and handing in all required paperwork/assessments to deadlines
- Taking care of their own health and seeking help if their health may impact on patient care

Students need to be aware that patients often talk to them and trust them as a member of the medical profession whatever stage they are at. From day one, they are placed in a very privileged position. They need to know that confidentiality is enshrined in law through the right to privacy and is an important part of the doctor-patient relationship. Notes that the student makes should be anonymous and kept securely. This also applies to using any patient information in assignments where names should be changed or written as Mr. A, Miss R, for example. Remind students not to talk about patients outside of the learning environment.

Pastoral check-in

We would advise acknowledging that you realise that starting at university can be a challenging time. Also, that some students may be dealing with significant life events or find some parts of clinical contact difficult or have special needs or an SSP e.g. need to be near a toilet, stretch breaks, learning needs etc. There is more about this in the GP teacher guide. Please ensure you have a brief (private) 1:1 chat with each student in your group during the first session. Ask them if there is anything they would like to let you know about, any additional help they may need on placement, and if they want to discuss anything with you in private in future how they can do that.

It may be helpful to follow this up with an email sent to all group member after the session; please free to adapt the suggestion below as you wish.

"It was good to meet you all in the group today. Thank you for your enthusiasm and contributions. I hope the course is going well so far and that you are settling into university life. If you are struggling, or if any of the cases we discuss are difficult or trigger memories of current or past life events, then please do let me know, or you can contact the GP lead lucy.jenkins@bristol.ac.uk.

Feedback and reflective log

If it hasn't happened already, then shortly, the students will be introduced to their e-portfolio called "*My Progress*". Here they are encouraged to reflect on encounters with patients with brief info and then to consider the *meaning* (to them), *medals* (new learning), and *missions* (future learning needs). These are reviewed by their professional mentors, and in the Spring, they will be asked to do a creative assignment based on a clinical encounter. In Foundations of Medicine, they should start thinking about and learning how to reflect on patients in group discussion (and in subsequent sessions, you can remind them to complete their learning logs).

Tips for dealing with emotion in patient encounters – please discuss this with your students

Please consider with your students how doctors (and by extension, medical students) often see people at some of the toughest points in their lives. Those patients coming to the GP may be feeling unwell, tired, anxious, sad, and sometimes angry. During the EC course the students will practise skills to communicate effectively with people in different situations, including when people are distressed or expressing concern.

In Effective Consulting we use the acronym **CALMS** to summarise some of the ways to help manage patient emotions. We tell the students that they don't have to do all of the steps every time, sometimes it is enough to acknowledge and allow emotion to be present, then ask if there is anything one can do for them.

We hope these may also be useful strategies for self-care, and for communication with family, friends and colleagues as well.

C - context
A - acknowledge & allow
L - list and listen
M - make meaning
S - strategies and summarise

1. Context: Consider the situation you are in. Do you have to find a more private place or a better time? Are you the best person right now to speak to the person or should you find someone else e.g. your supervisor or someone else on their medical team?
2. Acknowledge & allow: Acknowledge how someone feels in simple, factual terms "I can see you are upset." and then allow that emotion to be. Wait for the strong emotion to pass while offering small gestures of support.
3. List concerns & listen: Help the person list all their concerns using active listening skills and empathy--you are trying to get everything out on the table...this is where you try to find out *what i*s going on. You can try the following phrases:
4. "What's happening for you right now?"
5. "What are your concerns?"
6. "What else?"
7. Make meaning: This is where you try to understand *why & how* these particular issues are having an impact on this particular person.
8. "What's troubling you the most?"
9. "How does that make you feel?
10. "How does that impact you?"
11. Strategies and summarise: Enable someone who is upset to explore options. Often, it's less about finding a solution (there might not be one) and more about the person finding or building coping strategies. Summarise your discussion e.g. the situation, the things that help and the plan--who is going to do what next?

- "Who do you have to support you?" or "What support have you got?" and "How do they help?"
- "How are you handling this?" or "What helps you cope?" or "What helps?"
- "What do YOU think would help you?"
- "Is there something I can do for you right now?" or "Is there anything I can do to help you?"
- "Is there anything else you wanted to tell me?"
- Close with "Can we leave it there?"

Other activities

This should be more than enough for your first session. If your patient cancels and you cannot find a replacement, there is a useful activity practising patient introduction here. 'Show and tell' with common consulting room equipment is a good one for early sessions, and there are other suggestions– available in the GP teacher guide.