



UNSW Medicine & Health

Phase 1 Undergraduate Medicine Program

Student Guide 2022

Table of Contents

Welcome.....	3
Structure of Phase 1	4
Clinical Skills	5
Ethics.....	5
Quality of Medical Practice.....	6
Close the Loop – myExperience Survey Feedback	7
Assessment in Phase 1.....	8
Overview of assessment in Phase 1.....	8
Student Code of Conduct.....	10
Course Related Assessments	11
Exempted Assignment	12
Smarthinking at UNSW	12
End of course examinations in Phase 1	13
Phase Related Assessments.....	14
Feedback on your progress in the program.....	20
Progression	22
Preparing for Phase 2	23
Convenors in Phase 1.....	24
Faculty Wellbeing Officer.....	25
Prescribed Textbooks for Phase 1.....	26

Welcome

This guide is intended to serve as both an introduction and a set of useful resources during your time in Phase 1. For students joining the Phase in 2022, this will extend from the Foundations course in year 1 to the Ageing and Endings A course and the End of Phase examinations in year 2.



Phase 1 is a vital period in your education at UNSW, as it provides an opportunity for you to establish a base of knowledge and capability in many aspects of medicine. By the time you have finished Phase 1 you will have learned the basics of the key pre-clinical and para-clinical disciplines that underpin medical practice, including anatomy, histology, physiology, pharmacology, microbiology, and pathology. You will have learnt a little about psychiatry, paediatrics, and obstetrics and gynaecology. You will also have had the opportunity to develop your information literacy, written communication and basic research skills to a greater level through your assignment and group project work, and you will have had much more experience in working as a team. You will also have developed considerable expertise in those vital aspects of clinical medicine – effective communication and competent physical examination. All your learning in the program, and in this first Phase, will be focused on the program's eight capabilities: using basic and clinical sciences; social and cultural aspects of health and disease; patient assessment and management; effective communication; teamwork; self-direction and critical evaluation; ethics and legal responsibilities; and reflective practitioner. Your development in each of the capabilities will provide a solid foundation on which to build in subsequent Phases, and of course further on in your medical career. A lot to look forward to!

As well as this Phase 1 guide, the program guide and each individual course guide, there are four other important sources of information for you as you progress through Phase 1.

The first is the medicine program website (<https://medprogram.med.unsw.edu.au>) – this is a site available only to staff and students in the medical program, and is the repository of much helpful information. You should bookmark this site, and take the time to explore it so you are familiar with its content, particularly with regard to Phase 1.

The second source of information is the Phase 1 newsletter which is published several times each year. Please take the time to read these newsletters when they become available – they will contain important announcements and the answers to many of your questions. Back copies of the newsletters are also available on the Medicine program website. (<https://medprogram.med.unsw.edu.au/newsletters-phase-1>)

The third source is eMed (<https://emed.med.unsw.edu.au>), the website that contains detailed information on all the teaching activities and assessments in the program. eMed is also the place where you will find many learning resources, submit items for assessment, get your timetable, give feedback to your peers, view your portfolio summary and get your results.

Fourthly, and perhaps most importantly, each course has its own Moodle page. You should regularly log into the Moodle page (<https://moodle.telt.unsw.edu.au/>) as it provides you with important announcements about the course and links to lecture materials, scenario materials, online learning resources, pre-reading, tutorial worksheets, practical class material, formative feedback assessments, etc. Also, there are discussion forums where you can ask questions related to the projects and assignments as well as direct questions to discipline experts. There are a number of online resources available in Moodle. While some of these resources are helpful to you for revision, some of them are compulsory. For example, for some practical classes you need to complete the online activity prior to attending the class or you will not be permitted into the laboratory. You can keep track of your progress via the progress bar which will indicate whether you have completed an activity or not. You might be interested to know this tracking information is also available to staff.

As you get to know the staff of the Faculty, you will also appreciate there are a number of people who can help you in different ways. Many of these are identified in this guide, as well as on the program website. Please feel free to contact us whenever you have a problem or question – we are always happy to help if we can.

So welcome to Phase 1! I hope you enjoy this initial stage of your medical studies, and importantly I hope that you are able to use this time to establish a groundwork of knowledge and capability that will serve you well, both at university and in your later professional life.

Dr Karen Gibson
Convenor, Phase 1

Structure of Phase 1

In Phase 1 of the program, your learning will be focused on your scenario group. Teaching in the courses in this Phase is organised around scenarios which present activities that a typical medical graduate might be engaged in. You will be encouraged to discuss these scenarios in your scenario group sessions, and to reflect on the issues that are raised in the scenario presentation and other activities.

Through a series of learning activities - lectures, tutorials, practicals, online lessons and clinical visits - you will explore the key issues and concepts that will eventually be examined at the end of each course. You will also be able to choose to pursue topics that interest you through your group project and assignment work.

Phase 1 consists of eight courses (each with an end of course exam) and three End of Phase examinations. The sequence of courses is as follows:

Year 1 Courses (2022):

Foundations [MFAC 1501]

This course will introduce you to the main modes of teaching and the styles of learning in the program

Beginnings, Growth and Development – A [MFAC 1521]

Health Maintenance –A [MFAC 1523]

Ageing and Endings – B [MFAC 1526]

Year 2 Courses (2023)

Society and Health [MFAC 1527]

Beginnings, Growth and Development – B [MFAC 1522]

Health Maintenance – B [MFAC 1524]

Ageing and Endings – A [MFAC 1525]

Name Badges

All first-year students will be issued with name badges. Studies indicate that being identifiable makes people more accountable for their behaviour and wearing a name badge is one aspect of professionalism. While wearing a name badge, students are representing the university and the faculty as well as themselves. **You are expected to wear your badge for all learning activities** except lectures, but particularly for tutorials, clinical skills and hospital sessions.

Clinical Skills

Convenor: A/Prof Silas Taylor (silas.taylor@unsw.edu.au)

In Phase 1, the focus of the Clinical Skills element will be on understanding the impact of the illness on the patient and developing skills to gather information, primarily using communication skills, both generic (interactional) and clinical (eliciting a medical history). Physical examination skills will be taught and assessed when COVID-19 restrictions allow. There is no expectation that you will be able to determine a correct diagnosis.

An essential aspect of this element is the person- or patient-centred clinical method. You should appreciate the importance of fully understanding an individual's particular predicament and circumstances and their unique experience of illness and how this contributes to their care. You will develop generic communication skills that enhance your ability to understand a person's perspectives regarding their health and illness and also be encouraged to reflect on your interpersonal communication style and how this can be improved to help elicit information from people in your care.

You will learn how to characterise common symptoms e.g. in a patient with chest pain, the site, severity, duration and quality of the pain will help to indicate whether or not it is cardiac in origin. This approach will form the basis for future pattern recognition.

You may also have the opportunity to develop physical examination skills. The emphasis in Phase 1 in this regard is on correct technique in the physical examination, which will allow you to determine normality and assess abnormality. If COVID-19 restrictions allow, you should practise your physical examination skills on real patients so that you can appreciate the range of normality. In the End of Phase 1 clinical examination, you may be expected to perform satisfactory examinations of body systems with an emphasis on appropriate technique, in a professional interaction with a patient, again if COVID-19 restrictions permit.

While it is helpful to see patients with abnormal physical signs to understand the significance of physical signs, you will not be expected to detect physical abnormalities at the End of Phase 1, other than be able to describe some observable physical abnormalities.

For all interactions with a patient, you must obtain appropriate consent from the patient and the patient must understand that you are a medical student. This consent can also be obtained by the supervisor taking the student group. For intimate examinations and examinations on vulnerable adults, there is very specific information for students and staff to be aware of and this is detailed in the program guide and relevant phase and course guides.

Clinical Skills will be taught in integrated sessions on campus in the Clinical Skills Centre. These sessions will address communication skills and may introduce you to physical examination and simple procedural skills, if COVID restrictions allow. Face-to-face sessions as well as online learning activities may involve Simulated Patients (well people playing the role of a patient) in most courses, in a variety of ways. Depending on the COVID situation, you may then have the opportunity to further practise and develop these skills with real patients in hospital sessions. In the clinical environment, both simulated and real, students are expected to behave in a professional manner. To this end, students should review, be familiar with and abide by the [Student Code of Conduct](#) regarding Professionalism in Medicine.

A supplementary guide, available in the Clinical Skills module (self-enrolment required), provides detailed information on the objectives of this element of the program.

[Clinical Skills Moodle Site](#) (Student enrolment key: CS_Student).

Ethics

Convenor: Dr Vicki Langendyk (v.langendyk@unsw.edu.au)

The teaching of Ethics is integrated within each of the courses in Phase 1 and throughout all the phases in the program. It is represented visually in the Ethics roadmap – <https://medicine-ethics.teaching.unsw.edu.au/>. Generally, in each course in Phase 1 there are two lectures and two associated tutorials (only one tutorial in

Foundations). The lectures in each course are framed loosely by one of the ethical perspectives represented in the Ethics Cube, <https://ethics.med.unsw.edu.au/> as well as relating to the course content. Questions relating to Ethics may be included in all examinations and there are relevant assignments and projects in most courses.

In order to achieve the Phase 1 expectations for the Ethics and Legal Responsibilities graduate capability, most students will do an individual assignment and a group project with a focus on ethics and legal responsibilities in medicine. Sometimes, a part of an assignment or project can deal with ethical issues. You can also address this capability in a negotiated assignment. The capability will be assessed in the end of Phase Portfolio Examination to ensure that it has been adequately developed. If you are unsure about how to approach a topic for either an individual assignment or for a group project, you should discuss it with your ethics tutor, scenario group facilitator or with the Ethics convenor.

There is an Ethics UNSW Medicine page in Moodle which has resources, videos, articles and podcasts. Go to <https://moodle.telt.unsw.edu.au/course/view.php?id=29809> and self-enrol using Ethics_student. There is a recommended ethics text available in the library and there is a plethora of other reference books and online resources in addition to the Ethics Cube. Please feel free to email the convenor if you come across any additional interesting resources or have any specific feedback you would like to share.

Quality of Medical Practice

Convenor: Dr Amir Ariff (amir.ariff@unsw.edu.au)

The Quality of Medical Practice element (QMP) will give you a good grounding in Evidence-based Practice (EBP) and medical statistics as well as Quality and Safety in Medicine. These are all very important topics for you to learn to become high quality medical practitioners. See the [QMP Roadmap](#) for information about QMP content across the program.

QMP content in Phase 1:

EBP and medical statistics will be taught within each course from Foundations onwards. In Foundations, the basic skills of information literacy will be taught in a series of tutorials. This will teach you how to source and reference high quality literature evidence at university level. You will also learn about the process of evidence-based practice and be introduced to the basic study designs in clinical research. Following on in Phase 1 you will learn how to appraise evidence and apply it to medical situations.

QMP activities in Phase 1:

QMP in Phase 1 is taught using face-to-face classes and online learning activities e.g. lectures and practical classes and tutorials accessed via the [QMP module in Moodle](#) (self-enrolment key: QMP_Student), with many different types of online resources to assist your learning. By the end of Phase 1 you should have gained a good grasp of the essentials of medical statistics, critical appraisal, EBP, design of studies, basic research skills, analysis of data, and overall understanding of the concept of research.

QMP assessment in Phase 1:

EBP and medical statistics will be assessed in the end of course written examinations and also in the End of Phase examination. There is a compulsory research-based group project during the first half of the second year that involves the analysis and interpretation of simulated data, written up in the format of a journal article ready for submission to a publisher. There are also other assignments and projects offered specifically to assess topics involving EBP (e.g. screening and critical appraisal topics) as well as individual assignments and group projects that assess information literacy and critical appraisal skills under the generic capability of 'Self-directed learning and critical evaluation'. It is recommended that you tackle at least one 'QMP style assignment' during Phase 1 so that you can discuss this in your Phase 1 Portfolio Examination under this capability.

Quality and safety topics are presented in various activities throughout Phase 1, with medical error and adverse events specifically discussed within the Health Maintenance B course in a scenario-based activity. Learning about quality of care is essential in medical practice and is seen as a key requirement of the Australian Medical Council. You will learn more on this in Phases 2 and 3.

Close the Loop – myExperience Survey Feedback

The Faculty is committed to working with students to continuously improve the Medicine program. In response to requests from MedSoc for greater transparency regarding the Faculty's response to feedback obtained from student surveys such as myExperience and MedSEQ, we have created a website at:

<https://medprogram.med.unsw.edu.au/survey-feedback-phase-1> (zID and zPass required), which contains:

1. A summary of the myExperience feedback for recent iterations of each course;
2. A summary of the intended actions and/or action taken in response to myExperience feedback;
3. A link to the report on the most recent MedSEQ survey, which includes intended actions in relation to issues raised by students; and
4. A link to provide real-time anonymous feedback to the Faculty on current issues, outside of the regular myExperience surveys (please note that providing real-time feedback does not substitute for completing a myExperience survey at the end of each course).

Your input is valued, and leads to changes intended to improve your learning experience.

Assessment in Phase 1

Overview of assessment in Phase 1

Your participation in the Foundations course will be assessed on the basis of attendance and engagement in the activities undertaken as well as a written assignment and project. You must also pass the end of course examination. If you do not pass the end of course examination, you will not be permitted to continue in Phase 1.

In each of the seven courses that follow Foundations (Beginnings, Growth & Development A and B; Health Maintenance A and B; Ageing & Endings A and B; and Society & Health) you will be assessed on an individual assignment, a group project and an end of course examination. Assuming that you meet the attendance and engagement requirements (see below), the final mark for each individual course is based entirely on the examination mark. Additional formative assessment activities will be scheduled to give you an idea of the level of performance required in the end of course exam. Your project and assignment work forms the basis of your portfolio, which is assessed at the end of your second year.

Assignments and projects in each course will be graded **Fail**, **P-**, **P** or **P+** as explained in the Assessment section of the Program Guide. Failure to submit an assignment in a course without an approved Exemption will result in a Fail grade being recorded for that assignment. Failure to adequately contribute to a project in a course will result in a Fail grade being recorded for that project and a comment regarding this lapse in Professionalism in eMed.

You are required to submit a Negotiated Assignment as an individual assignment in at least one of the Phase 1 courses. The Negotiated Assignment will provide useful evidence of achievement in the Self-Directed Learning and Critical Evaluation Capability, as required for the Phase 1 Portfolio Examination.

You are also required to do Student-Patient Observed Communication Assessments (SOCA) across multiple courses in Phase 1. SOCA includes use of the Online Simulated Patient Interaction and Assessment (OSPPIA) platform which is an application which facilitates you to interact with simulated patients in the online environment and so will not be impacted by COVID restrictions. SOCA will provide important evidence of achievement in Effective Communication as required for the Phase 1 Portfolio Examination. More information is provided in your Phase 1 Clinical Skills Student Guide and Clinical Skills Moodle module.

The end of course examination for each course will be an integrated written examination with questions focusing mainly on biomedical and social sciences. This examination will be based on relevant "real world" scenarios, and will assess your understanding of the material presented in the course, including lectures, practicals, tutorials (both online and face to face), and scenario group sessions. It will generally comprise four questions, three of which will be in short answer format, and one of which will contain a number of objective item questions (Multiple Choice Questions – MCQ).

After the completion of Year 2 you will need to complete the End of Phase examinations. These consist of the Portfolio Examination, the End of Phase written examination and a Clinical Skills examination (Objective Structured Clinical Examination – OSCE). To be eligible to attempt these examinations, you will be required to have obtained a pass in 7 of the 8 Phase 1 courses that you have attempted (either initially, in a supplementary examination, or after repeating the course). In order to sit the Clinical Skills examination, you will also have to have demonstrated appropriate professional behaviour with regard to attendance at Clinical School teaching sessions and compliance with NSW Health ClinConnect requirements (see below). To be eligible to present your portfolio for examination you must also have obtained an overall **P-** or higher grade in at least 11 formal projects and assignments, of which at least 5 must be individual assignments. Your portfolio will include:

- the record of your achievements in the group projects and individual assignments, including grades and comments from the assessors
- a negotiated assignment
- at least 4 completed SOCAs (with reflection)
- feedback on teamwork contributions that you have given and received in the Teamwork system
- an essay reflecting on your progress in addressing the eight graduate capabilities

The End of Phase written examination consists of two components. The first component will consist of objective items (MCQs) addressing mainly concepts arising in the 'Using Basic and Clinical Sciences' and the 'Social and Cultural Aspects of Health and Disease' capabilities from all the courses in Phase 1. The second component, known as the progressive practical exam, will examine material covered in practical classes, and may involve a range of different question types, including objective item, short answer and practical items. This component is in the form of three practical tests administered during the Phase, one at the end of the first year and two in second year. You are required to obtain a pass grade in both the MCQ exam and the cumulative practical exam (including each discipline component) in order to pass the End of Phase written exam.

The Clinical Skills examination will consist of six stations and require you to effectively communicate with (real or simulated) patients. If COVID restrictions permit, you may also be required to physically examine patients. In some circumstances, students may be permitted to sit the OSCE if they have passed 6 of the 8 Phase 1 courses. Eligible students will be notified if applicable. More information on the OSCE is found in the P1/Graduate Entry Student Clinical Skills Guide.

All three End of Phase examinations are barrier assessments: the Portfolio Examination, the Written Examination (MCQ and practical components) and the Clinical Skills Examination. You must pass all three to qualify to progress to Phase 2 of the program.

Assessment in any General Education course(s) you take during this Phase will be the responsibility of the Faculty providing the course.

Attendance at Classes

You are expected to attend all classes and it is to your advantage to do so. Please see the university policy on Class Attendance. <https://student.unsw.edu.au/attendance>

UNSW Medicine expects students to attend **all** scheduled activities (including those online). Each course assessment includes attendance and engagement. It is important that you contact your course convenor or MESO if you need allowance for illness or misadventure. You are expected to be punctual for all classes. If you fail to comply with the attendance requirements for a course, you may be awarded an Unsatisfactory Fail (even if you pass the end of course examination).

Tutors keep attendance records in scenario group sessions, Clinical Skills sessions (both campus and hospital based), practical classes and Ethics tutorials. Student attendance at hospital teaching sessions is particularly important. Poor attendance is flagged by shared systems across all clinical schools and Faculty. Failure to attend without an acceptable reason will result in a comment regarding a lapse in professional behaviour being added to the student's Portfolio. More than one such Professionalism comment in eMed may lead to a recommendation that the student is **not eligible to sit the Phase 1 Clinical Skills examination**. It is important that students are aware of and comply with NSW Health (ClinConnect) compliance requirements, as discussed in the Program Guide and emphasised below.

It is your responsibility to frequently check the Timetable for assigned classes and any changes. Ignorance of classes which are scheduled in the Timetable is not an acceptable reason for non-attendance.

You can attend only classes to which you are allocated. You **may not attend** hospital sessions, practicals or other classes at different times or locations to those in your timetable. Staff may ask you to leave if you are not in the correct class. This is particularly important because of the need to adhere to occupancy limits imposed by the "COVID capacity" of individual teaching spaces.

Consequences of failure to be compliant with NSW Health requirements for clinical placements

As medical students, you are required to be compliant with the NSW Health requirements regarding vaccinations, National Police Certificate etc. Further information about these and other regulatory requirements for clinical placements is available in the Program Guide. The NSW Health database where this information is managed is called ClinConnect.

If you are not compliant with NSW Health requirements, you will not be allowed to attend hospital sessions. This is dictated not by Faculty but by NSW Health. However, due to the onerous administrative burden of monitoring student compliance, Faculty requires that you **MUST** be compliant **ON THE DAY** the teaching period commences, or you will be **BANNED** from the hospital for ALL clinical sessions in that teaching period. Regrettably, this ruling has become necessary in recent years due to a tiny minority of students simply ignoring repeated emails from MESO informing them that they were not compliant. The Faculty does not want to ban students, but we will continue to do so, to ensure that students take the compliance requirements seriously.

Look out for emails about compliance and especially regarding 'bulk compliance sessions' run by NSW Health on Kensington, Port Macquarie and Wagga Wagga campuses at various times in the year. Make sure that you get all your documentation ready in time for these compliance sessions. This may take more time than you expect and it is vital that you check you have **EVERYTHING** required. Temporary compliance is sometimes granted by NSW Health, but it lapses after varying periods of time depending on your unique circumstances. Faculty cannot be expected to follow up each individual student and will not do so. Thus, it is your responsibility to check that you become **FULLY COMPLIANT** in the appropriate timeline. Get your clinical training off to a good start– **BE COMPLIANT**.

A Professionalism comment will be added to the student's portfolio when a student is not compliant and subsequently banned by Faculty. This is in addition to being banned!

Student Code of Conduct

Students and staff are governed by the normal laws that regulate our daily lives, but in addition the University has its own code of rules and conduct expressed through its policies and procedures. Good conduct and academic honesty are fundamental to the mission of the University as an institution devoted to the pursuit of excellence in scholarship and research, and to the service of society. These principles apply to the whole University community, including students and staff, and have been developed over many years. There are also specific documents that relate to the use of [Social Media](#) whilst a student at UNSW.

In addition to the general standards at UNSW, medical students are expected by their colleagues and the public to demonstrate a high degree of professionalism and these expectations are outlined in the faculty-specific document: [Professionalism in Medicine: A Student Code of Conduct](#). Professionalism extends across all eight graduate capabilities, and is especially applicable to indicator 1.7.8 in Phase 1. The consequences of unprofessional behaviour can range from a comment placed by a course or Phase Convenor in the student's portfolio to a formal allegation of student misconduct. Serious or repeated incidents will be dealt with as outlined in the relevant documents hyperlinked above. Please ensure that you are familiar with the content of these documents.

All students should familiarise themselves with all policies and guidelines on the [Medicine Program website](#). Further information is available at: <https://medprogram.med.unsw.edu.au/phase-one> and <https://student.unsw.edu.au/policy>.

Course Related Assessments

Individual Assignments and Group Projects

The individual assignments and group projects in Phase 1 have been designed to allow you to explore aspects of medicine that are of particular interest to you or that you need to address in order to meet the requirements of the Phase 1 Portfolio Examination. The individual assignments and group projects offered in each course will be related to course themes rather than to the individual scenarios within a course. During Phase 1, you must also attempt at least one negotiated individual assignment.

Topics, Length and Choice

Most courses will offer a choice of individual assignments and group projects. You must complete one individual assignment and one group project in each course, although in Year 2 you will not be required to complete an individual assignment in AE unless you need this assignment to be eligible to sit the Portfolio Examination. Projects and assignments are marked with an overall grade, and grades for each capability that is addressed in that assignment/project. These are either **focus capabilities** or **generic capabilities**.

Focus Capabilities

An assignment or project will have a specific focus on two of the eight graduate capabilities.

Generic Capabilities for assignments

In addition, all assignment reports will be graded for the capabilities of:

- Effective communication
- Self-directed learning and critical evaluation
- Development as a reflective practitioner

Generic Capabilities for projects

In addition, all project reports will be graded for the capabilities of:

- Effective communication
- Self-directed learning and critical evaluation
- Teamwork

Each of the generic capabilities will be assessed for each project and assignment, using 'generic' criteria described in the Assessment section of the Program Guide. If the project or assignment also has one or two of these capabilities as a focus, additional criteria to the generic criteria will be used when the focus capabilities are assessed.

Unless otherwise specified, the length for reports is up to 2000 words for an individual assignment and up to 2500 words for a group project. Reports that are more than 10% above the permitted word count may be penalised in the grading. Projects or assignments that result in posters or other education materials or resources will require a written report to explain the research undertaken and the judgments made in developing the materials, and evidence that the socio-cultural context of the target group has been taken into account. One additional file may be submitted as supporting evidence e.g. a poster, leaflet, video or audio file

Group projects are designed for 4 to 6 students. Group project reports should present a coherent and focused response to the project task or question. They should not be a simple compilation of the individual reports of group members.

During Phase 1 of the program, you are required to negotiate at least one assignment. One capability focus of a negotiated assignment is Self-directed Learning and Critical Evaluation, and the criteria for this focus are set. The additional capability focus and other details are negotiated as described below. You may negotiate an assignment on a relevant topic of your choosing in any course in the Phase, although you should only do so after you are familiar with the process of assessment. Most students do their negotiated assignment in their second year.

Suggested Media and Formats

All student work is stored electronically and is available to examiners throughout Phase 1 and subsequent Phases of the program. For ease of access by multiple users, written reports may be submitted in Word or PDF format.

Patient education materials such as brochures and booklets may be developed using other programs but should be submitted as supporting files in PDF format. The following formats will be supported:

- Written report (Word “.doc”, “.docx”, PDF, or RTF)
- Poster (PowerPoint, .ppt, .pptx or PDF)
- Audio and Video (digital format) AVI, MPEG or QuickTime
- Patient education materials (PDF)
- Webpage (HTML)

All submissions must be made using the eMed Portfolio system using one of these formats. Large files containing multiple images, movies or imported data may not be accepted by eMed.

Negotiated Individual Assignment

As evidence for the capability of Self-Directed Learning and Critical Evaluation, you are required to negotiate at least one assignment in Phase 1. This will allow you to develop the ability to conceive a research question, plan and implement a learning project. The experience of negotiating an assignment in Phase 1 is intended as a preparatory activity for the more independent style of learning that will operate in the later Phases in the program, especially in the Independent Learning Project or Honours Project and Phase 3. You should ensure you have submitted at least one negotiated assignment before the Portfolio Examination at the end of second year. It is not recommended that you negotiate an assignment until at least the last course of your first year, so that you have gained experience in the requirements of assignments.

Only 110 students can submit a Negotiated Assignment proposal in any individual course. Because of this quota, if you wish to complete a negotiated assignment you need to register an Expression of Interest (EOI) by Wednesday 9 am in Week 1 of the course. You will be notified by the end of the day whether you have been selected within the quota. If you are selected, then you can submit a proposal. You should try to avoid leaving your negotiated assignment until the final course of Phase 1 because, if the proposal is not accepted, you will not have another chance to fulfil this requirement for your portfolio. Developing a proposal, considering feedback and implementing the plan are essential parts of the process and of the learning involved in this activity, and require due attention and thought. Although you may negotiate more than one assignment in Phase 1, in order to accommodate all students within the quota, preference may be given to students who have not had an EOI accepted previously.

See the medical program website for further instructions about the Negotiated Assignment.

<https://medprogram.med.unsw.edu.au/negotiating-assignment>

Exempted Assignment

Year 2 students may elect to be exempt from doing an assignment in Ageing and Endings. With this exception, all students must complete an assignment and a project in each Phase 1 course they attempt, including when they are repeating a course. Only one exemption is permitted during Phase 1.

Smarthinking at UNSW

Smarthinking is an online writing support service provided by Pearson. It is free for UNSW students, and it features 24/7 accessibility to asynchronous and synchronous services which students can access to receive personalised feedback on aspects of their writing. This includes development of ideas, organisation and structure, and grammar. It can be useful for students who find written tasks challenging or who are not sure about the best approach to written assignments in Medicine. It is important to realise that they will not write your assignment for you! They will only help students develop writing skills.

The services offered include:

- Submitting a piece of writing for review and feedback within a 24-hour turnaround timeframe;
- Connecting and interacting in a one-on-one session with a Smarthinking tutor;
- Scheduling a one-on-one session with an online tutor at a time suitable to the student;
- Submitting questions about specific aspects of writing.

The asynchronous services consist of the following:

- Paragraph Submission: for feedback on paragraphs of about 200 words;
- Grammar & Documentation: for feedback exclusively on grammar, language and punctuation;
- Essay Centre: the most comprehensive check for longer pieces of writing (up to 2,500 words). Here students can choose up to two aspects for feedback out of the following nine categories: organisation, content development, main idea/topic, word choice, sentence structure, use of resources, introduction/conclusion, grammar and mechanics and transitions.

This service is being offered to all students in 2022. There are limits on how much support each student can request in each course. More information is available at Smarthinking [webpage](#).

End of course examinations in Phase 1

At the end of each course in the Phase, you will be required to sit a written examination. These end of course examinations (apart from the Foundations course examination) are generally of 2 hours duration. They primarily examine the 'Using basic and clinical sciences' and 'Understanding the Social and Cultural Aspects of Health and Disease' capabilities, but may also address some of the other capabilities. Typically these exams will consist of both multiple choice questions (40%) and short answer questions (60%).

The overall grade for the course will be derived from your performance in this examination, provided your project and assignment work in the course is of a satisfactory standard and you have met course attendance requirements. To pass the end of course examination you must achieve a mark of 50% or greater.

Phase Related Assessments

Student-Patient Observed Communication Assessments (SOCA)

The SOCA is a mandatory assessment related to multiple courses in Phase 1. Some or all SOCAs may be performed online using the OSPiA platform, depending on the COVID-19 situation. If restrictions permit, SOCAs may also be performed on campus and in hospital. SOCA is part of the Clinical Skills assessments, and contributes to the Phase 1 Portfolio (see below). More details about SOCA are found in the Phase 1 Clinical Skills Guide and in the Clinical Skills Moodle module.

Phase 1 Portfolio Examination

For each Phase, capability indicator statements describe goals and specify the minimum expectations (range and depth) for the graduate capabilities (see the 'Phase 1 Expectations for the Graduate Capabilities' document later in this Guide). These indicator statements are the assessment criteria for the Portfolio Examination. Capabilities are cumulative – once developed they are expected to be used and refined in subsequent phases.

The Phase 1 Portfolio Examination consists of two components of equal weighting:

- (1) combined overall grades awarded for assignments and projects throughout Phase 1
- (2) the Portfolio Review.

To be eligible to present your portfolio for examination, as well as having completed the eight Phase 1 courses and already passed a minimum of seven courses, you must have obtained an overall P- or higher grade in at least 11 formal projects and assignments of which at least five must be assignments. The evidence must include a negotiated assignment. The results for any resubmitted projects or assignments and the original results, SOCA including your subsequent reflections, and feedback from tutors and peers are part of the record of evidence considered at the portfolio review. If you have not gathered sufficient evidence, you will not be allowed to submit your portfolio. The Phase 1 Portfolio Examination is a barrier for progression to Phase 2.

For the Phase 1 Portfolio Examination review component, you are required to consider how your project and assignment work and other experiences have contributed to your achievement of the indicators in each capability for Phase 1, and to write reflectively about your strengths and weaknesses. All the graduate capabilities for the Program must be addressed. The Program website includes more detailed information on what you might include when writing about your performance for each of the capabilities.

The portfolio, consisting of the record of evidence held in the eMed system and your reflective essay, is reviewed. A grade is awarded for each of the eight graduate capabilities using the Faculty's four-point grading system. An overall grade is calculated using an algorithm based on distribution of these capability grades. The award of a Fail grade for any capability, or more than two P- grades for individual capabilities, will constitute an overall Fail.

Preparing your portfolio

- You must address each capability at least once as a focus capability in either an assignment or a project. If possible, aim to address each capability at least once as a focus capability in an **individual assignment**.
- It is not necessary to address each capability as a focus capability in both an assignment and a project.
- Your communication assessments (SOCA) are included in the determination of your grade for the graduate capability of Effective Communication, but are not sufficient alone. Effective Communication also needs to be addressed as a focus capability in an assignment or project.
- Use the negotiated assignment to balance your portfolio. If all graduate capabilities are already being developed satisfactorily, it is an opportunity to pursue an area of interest.
- Performance in the generic capabilities is considered when assessing these four capabilities. However, it is essential that these capabilities are also addressed in assignments and projects as focus capabilities; you cannot rely on your performance in these capabilities based on the generic criteria only. For example:
 - You cannot completely offset a poor grade for 'Reflective Practitioner' in an assignment with satisfactory grades for the generic capability.
 - An unsatisfactory grade in the 'Self-directed Learning and Critical Evaluation' focus capability in a negotiated assignment cannot be fully compensated by obtaining good grades in the generic 'Self-directed Learning and Critical Evaluation' capability.

- If you receive a poor grade (particularly F grade) for ‘Self-directed Learning and Critical Evaluation’ as a focus capability in your negotiated assignment, you should consider negotiating another assignment. If this is not possible due to the quota system limiting the number of negotiated assignments in each course, it is recommended that you address this capability again as a focus capability in a set assignment.
- Try to repeat a focus capability for which you receive an F or P- grade in any previous assignment or project. It is important to demonstrate that you are responding to critical feedback. You should aim to have positive comments and improving grades in your assignments and projects for each capability over the Phase.
- Students whose record of evidence is poor (e.g. failed assignments or multiple P- and/or F grades, particularly in several capabilities) or deficient (e.g. an assignment or project not submitted in one or more courses) is at increased risk of failing the Portfolio Examination. If identified during Year 2 they may be formally advised of this and counselled regarding remedial actions they should take during their remaining Phase 1 courses.
- If you receive a P- or F grade late in Phase 1 and do not have the opportunity to address the shortcoming in another assignment or project, you will need to describe in your portfolio essay how you plan to deal with this in Phase 2. It is not sufficient to say that you will “do better next time”: you need to provide a detailed plan that identifies the issues that led to the initial result and shows how you intend to address them. You may also consider how you will evaluate whether your proposed changes are successful.
- Ensure that you and other members of your group projects provide peer feedback comments via the eMed: Feedback tab in eMed. The comments you contribute and receive in this system form part of your portfolio evidence for the Teamwork capability. If no comments are recorded this may result in you failing this capability.
- Additional material directly relevant to an assignment or project (e.g. presentation +/- feedback report) may be submitted into eMed as **Supportive Evidence** and tagged to the relevant assignment or project.
- Collect informal evidence from other activities (e.g. CPR training, community service) and submit it to eMed: Portfolio as other **Evidence of Achievement**. When you submit this Evidence of Achievement you should indicate for which single capability you wish it to be considered as evidence. As this informal evidence will not have been assessed or corroborated by the Faculty, it must be clearly referenced with the contact details of a person who can verify its authenticity when it is submitted. You must not rely solely on other Evidence of Achievement for any capability. Submit relevant evidence only: if it does not demonstrate your development in the selected graduate capability, your examiner will perceive that you do not have a good understanding of the capability indicator statements.

Getting help with your portfolio

Each student is allocated a College Portfolio Advisor, based on your timetable groups in Year 1.

Phase 1 Portfolio Advisors

College:	Advisor:	Contact email:
College Hollows	Dr Karen Gibson	k.gibson@unsw.edu.au
College Cooper	Dr Narelle Mackay	n.mackay@unsw.edu.au
College Blackburn	Mr Martin Le Nedelec	m.lenedelec@unsw.edu.au
College Stanley	Professor Tony O’Sullivan	a.osullivan@unsw.edu.au
Port Macquarie campus	A/Prof Linda Ferrington	l.ferrington@unsw.edu.au
Wagga Wagga campus	Dr Michael Macartney	m.macartney@unsw.edu.au

- Portfolio Advisors focus on academic questions around preparation for the Portfolio Examination, including advice on feedback from examiners and where an assignment or project has failed. The Portfolio Advisor can also assist with referral to suitable sources of assistance for your university career.
- You may seek advice about which capabilities you should focus on to balance your portfolio, or whether you need to do any further assignments or projects focusing on a particular capability. You should also use the discussions in the scenario group to help you plan your projects and assignments to ensure you cover all the capabilities adequately.

- Your Portfolio Advisor can assist in determining what informal evidence may be suitable for your portfolio.
- Your Portfolio Advisor **cannot** give you feedback on a draft version of your portfolio essay. Exchange your draft with a fellow student for peer feedback. You must not collude with another student to write your portfolio. The portfolio will be checked by plagiarism detection software.
- If you fail the portfolio review, your Portfolio Advisor will help you to identify areas to be addressed before your supplementary assessment.

Writing your portfolio essay

- The portfolio essay is **maximum 3500 words**. Exceeding the word count may result in a reduced grade for the graduate capability of Effective Communication. The 10% leeway in word count allowed for Phase 1 course assignments and projects to compensate for in-text references is not applicable for this essay.
- A brief introduction and/ or conclusion, contents page or tables are optional in the portfolio essay, but if they are used they are included in the word count. A title page and references are not included in the word count.
- Structure your reflective essay using each capability as a sub-heading, in the order that they appear in the Phase 1 Expectations for the Graduate Capabilities document. Read the capability indicator statements and select your examples carefully to relate to each capability.
- The portfolio reviewer has access to ALL your grades and examiners' comments from your assignments and projects. There is no need to include these comments – simply refer to them if you wish.
- The portfolio reviewer will be looking for evidence that you have developed in each capability, and will use the indicator statements as a guide to the types of performances of which you should be capable at this stage. There are too many indicators for you to be able to address all of them adequately or separately. You should try to provide evidence of your development and progress in relation to **2 or 3 indicator statements for each graduate capability**. Refer your comments on your progress to the relevant indicator statements. Do not claim to have addressed indicators without any evidence to support this.
- The portfolio reviewer will look for evidence of your ability to reflect honestly and openly on your development in each capability.
- It should not be assumed that P or P+ grades for a particular capability in all Phase 1 assignments and projects will ensure a pass in that capability in the portfolio review. The final grade for the review will also depend on other accumulated evidence and the reflective essay. It is unlikely that a student will perform so poorly in the essay that good grades in the assignments and projects will be negated, but it can occur. Conversely the reflective essay may offset poor performance in assignments and projects.
- Do not ignore a poor grade from an assignment or project when writing the reflective essay – take note of the examiner's comment, reflect on why your mark was low and the concerns raised in the feedback, identify relevant issues and show how you have sought to address them.
- The portfolio examiner has access to any Professionalism comments that you may have received during the Phase. It is essential that you reflect on these comments and show how you have dealt with them. Failure to address the lapse in professionalism adequately in your reflective essay, as part of your discussion for the relevant capability, is likely to be reflected in your grade for that graduate capability.
- Do not use your reflective essay to argue or defend a poor grade in an assignment or project.
- Do not focus solely on your performance in assignments and projects. The portfolio essay is intended to be a personal reflection on your development. Use your experiences over the phase, especially your clinical experiences, to illustrate how you have developed, where your strengths and weaknesses lie, and how you plan to address the latter.
- Do not use your reflective essay to provide general feedback on the Medicine program.
- You must not refer to your end of Course and other end of Phase examination results (including the Clinical Skills examination) in this reflective essay.

Submitting your portfolio

At the end of Phase 1 you must submit your portfolio for summative examination. The portfolio is submitted in electronic format to eMed: Portfolio. The full portfolio seen by the examiner includes:

- 1) A list of assignments and projects you have completed during the Phase with their grades, capability focuses and examiner feedback; Supportive Evidence; SOCA including grades, feedback and your reflections; facilitator feedback; other Evidence of Achievement records you have submitted; feedback you have given

to, and received from, your group project members as evidence towards your achievement of the Teamwork capability. You may also submit self-assessment comments on your teamwork at any time, and these will also be available. If you have received any Professionalism comments, these will be visible to the examiner. **All these lists are automatically generated by the eMed: Portfolio and Teamwork systems for the examiners - you do not need to submit them or copy them.**

- 2) The reflective essay which refers to your assignments and projects in Phase 1, relevant significant experiences such as critical incidents which occurred in class, cross-cultural encounters, clinical experiences and extra-curricular activities. Your essay must show how your work in the Program has contributed to your achievement of each capability. You should demonstrate your ability to reflect on your learning in Phase 1 by highlighting your strengths and weaknesses in each capability, and how you are addressing the latter.

Grading of the portfolio

- (1) COMBINED OVERALL GRADES awarded for assignments and projects throughout Phase 1 – 50%
- (2) PORTFOLIO REVIEW – 50%
 - In the portfolio review, the grade awarded for each capability is based on both the capability grades in the assignments and projects AND how the capability is addressed in the reflective portfolio essay. There is no formula for averaging the grades from assignments and projects for the capabilities.
 - Each capability receives a grade of F, P-, P or P+. In this marking scheme a P grade indicates a performance that meets all expectations, a P+ grade exceeds expectations, and a P- indicates a performance that requires further work to bring it to the expected standard. An F grade indicates a substantial failure.
 - All capabilities are weighted equally. An overall grade for the portfolio review is calculated using an algorithm based on distribution of the eight capability grades.
 - The award of F grade in any one capability or more than two P- grades for individual capabilities in the portfolio review will constitute an overall Fail in the Portfolio Examination. In cases of unsatisfactory performance in a capability or overall, double marking is used to ensure reliability.
 - Students with an overall P- for the portfolio review will be deemed to have passed the portfolio examination requirement for progression to Phase 2. They will usually be advised in examiner feedback of areas requiring evidence of further development during Phase 2.

OVERALL PORTFOLIO EXAMINATION MARK:

- The combined overall mark is based equally on (1) the overall grades in assignments and projects throughout Phase 1 AND (2) the overall grade for the portfolio review. The combined overall mark for the portfolio examination will be graded numerically.
- Even if your combined overall mark (overall assignment/ project marks and the portfolio review) is >50% but you have failed the portfolio review, you will be required to re-submit the portfolio essay for supplementary assessment.

Failing the portfolio examination

- Students who fail their portfolio at the first attempt will be given an opportunity to re-submit their amended portfolio for supplementary assessment.
- Students who fail a supplementary portfolio assessment may be required to undertake an individual study program (ISP) in a further one or two teaching periods in Phase 1 before being eligible to resubmit their portfolio for final supplementary assessment. These ISPs require the students to meet attendance and engagement requirements for SG sessions for the relevant courses and submit an assignment and group project for each course, but will exempt them from the end of course examinations. Students may enrol in extra-Faculty courses during these teaching periods.
- Students who fail this final supplementary assessment will formally fail the Phase 1 Portfolio Examination and exit the Medicine program according to the Rules of Progression.

PHASE ONE EXPECTATIONS FOR THE GRADUATE CAPABILITIES

1.1: Using Basic and Clinical Sciences	1.2: Social and Cultural Aspects of Health and Disease	1.3: Patient Assessment and Management	1.4: Effective Communication
<p><i>In relation to themes and content areas which have been studied, the student:</i></p> <p>Mechanisms of Health and Disease</p> <p>1.1.1 Explains mechanisms that maintain a state of health.</p> <p>1.1.2 Recognises health problems and relates normal structure and function to abnormalities.</p> <p>1.1.3 Describes the pathophysiological process of health problems and can explain their basis at the whole person, organ system, cellular and molecular levels.</p> <p>1.1.4 Identifies the components of "basic/ medical" science that are necessary to understand a scenario that has not been studied, locates relevant information and interprets the scenario when the relevant information is available.</p>	<p><i>In relation to themes and content areas which have been studied, the student:</i></p> <p>Social Determinants of Health & Disease</p> <p>1.2.1 Identifies environmental, psychological, social and cultural issues which contribute to health problems in a scenario (eg sexuality, stress, family relationships, risky behaviours).</p> <p>1.2.2 Explains the mechanisms by which those psychological, social and cultural issues identified affect health.</p> <p>1.2.3 Identifies health care needs of different groups in society (eg the elderly, indigenous people, immigrant groups and refugees).</p> <p>Measuring Health Status</p> <p>1.2.4 Describes and interprets patterns of illness including use of basic statistical and epidemiological concepts.</p> <p>Health Care Systems</p> <p>1.2.5 Understands equity and its implications for health care delivery for individual and population based approaches.</p> <p>1.2.6 Describes the basic structure of the Australian health care system including the responsibilities of Commonwealth, State, non-government organisations and the private sector.</p> <p>1.2.7 Describes how people living in Australia access (or are unable to access) their health care system.</p> <p>Improving Health by Public Health Approaches</p> <p>1.2.8 Describes primary, secondary and tertiary approaches to disease prevention and health improvement.</p> <p>1.2.9 Distinguishes between surveillance and screening and can describe the principles of screening, including characteristics and impact of tests.</p>	<p>Consultation</p> <p>1.3.1 Elicits important symptoms and signs related to body system(s).</p> <p>1.3.2 Relates symptoms and signs to relevant underlying basic and clinical sciences.</p> <p>1.3.3 Understands patients should share decision-making and planning of their treatment, including communication of risk and benefits of management options.</p> <p>Physical Examination</p> <p>1.3.4 Examines a system in isolation to a standard as described in the Phase 1 Clinical Skills guide.</p> <p>1.3.5 Relates examination skills (both how and why they are performed) to relevant underlying basic and clinical sciences.</p> <p>Procedural Skills</p> <p>1.3.6 Satisfactorily performs procedural skills listed in the Phase 1 Clinical Skills guide.</p> <p>1.3.7 Relates procedural skills (both how and why they are performed) to relevant underlying basic and clinical sciences.</p> <p>Clinical Reasoning</p> <p>1.3.8 Applies clinical reasoning to relevant health scenarios, including the identification of key features and clinical patterns.</p> <p>Management</p> <p>1.3.9 Articulates a general strategy of management, consistent with the pathophysiological model of illness at an elementary level that includes an understanding of foundation principles, e.g. pharmacology. There is no expectation for students to devise management plans.</p> <p>Quality & Safety</p> <p>1.3.10 Places the needs and safety of patients at the centre of the care process.</p> <p>1.3.11 Complies with relevant safety skills and policy including: infection control, manual handling, safe use of hospital equipment, and occupational immunisation requirements.</p> <p>Patient Assessment and Management involves communication. Refer to the capability of Effective Communication for other relevant elements.</p>	<p>Communicates Effectively with Patients and their Families</p> <p>1.4.1 Understands principles of good communication (e.g. effective questioning, active listening, understanding the patient perspective including recognising cultural differences and commonalities, acknowledging and working to overcome judgement & prejudice).</p> <p>1.4.2 Applies these principles to 1.1 consultation with a patient:</p> <ul style="list-style-type: none"> Establishes rapport. Identifies reason for encounter. Explores patient problem(s). Identifies significant features of history. Determines patient expectations. Displays respect and empathy for patients from differing backgrounds. Determines impact of problem on patient's life. Provides structure to consultation. <p>Communicates Effectively with Peers and Tutors</p> <p>1.4.3 Presents reports effectively to groups of peers.</p> <p>Communicates about health behaviour</p> <p>1.4.4 Develops clear written/visual information in relation to health and health promotion for specific target groups.</p> <p>1.4.5 Explores patient views about lifestyle and behaviours that may be detrimental to health.</p> <p>Written Communication</p> <p>1.4.6 Writes clearly and logically, using appropriate language, media and style for the intended audience.</p>

Section One: 2

PHASE ONE EXPECTATIONS FOR THE GRADUATE CAPABILITIES

1.5: Team Work	1.6: Self-Directed Learning and Critical Evaluation	1.7: Ethics and Legal Responsibilities	1.8: Reflective Practitioner
<p>Participates Effectively in Peer Groups</p> <p>1.5.1 Identifies different purposes of group work, analyses how well groups work, discusses differences in contribution styles and identifies contributions in terms of task focused behaviour, group support behaviour, non-productive behaviour.</p> <p>1.5.2 Gives feedback on group roles and contributions constructively and respectfully, receives feedback openly and non-defensively.</p> <p>1.5.3 Analyses and evaluates own roles and contributions to group work using own observations and feedback from others.</p> <p>1.5.4 Monitors roles and contributions to group work, the learning environment and group process, communicates concerns appropriately and acts to ensure effective group process.</p> <p>Participates Effectively in Health Care Teams</p> <p>1.5.5 Explains roles and functions of other health professionals in patient care.</p>	<p>Directing own learning</p> <p>1.6.1 Identifies questions and learning needs arising from scenario sessions and other teaching activities. Engages in appropriate activities to address identified needs.</p> <p>1.6.2 Initiates at least one individual assignment in Phase 1. Negotiates the focus and scope and completes the project substantially as planned.</p> <p>1.6.3 Registers for and submits an individual assignment and group project in each course, addressing registration and task requirements satisfactorily and in a timely manner.</p> <p>Finding, Evaluating and Synthesising Evidence</p> <p>1.6.4 Demonstrates the following skills in Phase 1:</p> <ul style="list-style-type: none"> Formulating and applying appropriate information searching strategies. Using databases such as Medline and other information sources appropriately. Appraising the quality and relevance of the information found. Using appropriate citation standards. <p>1.6.5 Demonstrates an understanding of basic statistical principles and ability in handling and presenting quantitative, and to a lesser degree qualitative, information appropriately.</p> <p>Self-Directed Learning and Critical Evaluation <i>involves both self-assessment and reflection. These elements are addressed under the capability of Reflective Practitioner.</i></p>	<p>Developing a Personal Value System</p> <p>1.7.1 Explores the psychological, social and cultural determinants of one's own values and can discuss the relevance and appropriateness of personal values in clinical medicine.</p> <p>Sensitivity, Tolerance and Respect for Others</p> <p>1.7.2 Develops sensitivity to different needs and values of others, including those from different social and cultural backgrounds, and acts with respect.</p> <p>1.7.3 Identifies and discusses ethical issues in interactions between fellow students, with staff and with patients.</p> <p>Clinical Ethics</p> <p>1.7.4 Identifies and discusses the ethical aspects of scenarios and other experiences.</p> <p>1.7.5 Understands the need for patient autonomy, informed consent, confidentiality and privacy.</p> <p>1.7.6 Understands and can discuss a number of different ethical perspectives and apply at least three of these to clinical situations.</p> <p>Legal Responsibilities</p> <p>1.7.7 Understands the legal responsibilities of health professionals in relation to duty of care.</p> <p>Academic and Professional Conduct</p> <p>1.7.8 Demonstrates professionalism, honesty and integrity in all academic and professional contexts</p>	<p>Self and Peer Assessment</p> <p>1.8.1 Engages in self-assessment of own work and of contributions to project, scenario and clinical group activities.</p> <p>1.8.2 Engages in peer assessment of others' work and of others' contributions to scenario and clinical groups.</p> <p>1.8.3 Participates constructively in portfolio and small group reviews, evaluating own learning outcomes and processes, and identifying issues that need to be addressed.</p> <p>Reflective Practitioner</p> <p>1.8.4 Provides accurate and neutral descriptions of own behaviour, emotions, and intentions. Analyses the impact of own and other's behaviour and cultural background on self and others.</p> <p>1.8.5 Analyses experiences and feedback in terms of strengths and weaknesses, identifies barriers to improvement in all capability areas and addresses these barriers, or articulates realistic and coherent plans to do so.</p> <p>1.8.6 Identifies limits of own understanding and skill, and identifies issues for further learning.</p> <p>1.8.7 Seeks additional information and help appropriately.</p> <p>Recognising Limits</p> <p>1.8.8 Demonstrates awareness of factors that affect and support doctors' health and wellbeing, including fatigue and stress management, to mitigate health risks of clinical training and professional practice and ensure fitness to practice.</p> <p><i>Reflective practice involves giving and receiving feedback. Feedback is addressed in the Teamwork and Effective Communication capabilities.</i></p>

End of Phase 1 Clinical Skills Examination

At the End of Phase 1, you will sit a Clinical Skills examination consisting of stations at which your performance in simulated clinical and communication tasks is assessed. At each station, depending on COVID-19 restrictions, your performance will be assessed in relation to one or two of the relevant graduate capabilities: possibly Patient Assessment and Management, and definitely Effective Communication. The expectations for your performance in this examination are derived from the Phase 1 indicators for these capabilities. The focus will be on the skills and issues addressed in the Clinical Skills program. Due to COVID the exact nature of this examination has varied in recent years. More details on this examination are provided in the supplementary guide for this element, the Phase 1 Clinical Skills Student Guide (see the Clinical Skills module) <https://moodle.telt.unsw.edu.au/course/view.php?id=7698>. More up-to-date information will be communicated to students during the year such that your assessment matches the opportunities you have had for learning clinical skills.

Students' eligibility to sit this examination may be determined by Professionalism comments entered on their eMed Portfolio in regard to attendance, and in turn, attendance may be determined by student compliance with NSW Health (ClinConnect) requirements. It is critical that students are aware of and follow all NSW Health (ClinConnect) and attendance requirements.

End of Phase 1 Written Examination

At the end of Phase 1, you will sit an examination that addresses the content from all courses in the Phase. This examination mainly aims to test your understanding of the medical and social sciences taught in Phase 1. It will also encourage you to review previous work in Phase 1 and improve your understanding of common themes and concepts. The written examination consists of two components, undertaken at separate times and in separate venues. Each component is worth 50% and you must pass each component.

The first component, the multiple choice question exam, consists of 80 objective items that focus on the Using Basic and Clinical Sciences and Social and Cultural Aspects of Health and Disease capabilities. Some of the questions in this exam will be drawn from previous end of course exams and some will be entirely new. The distribution of questions will reflect the scope and depth of material covered in all Phase 1 courses. You will have 120 minutes to complete this examination.

The second component, the cumulative practical exam, will be based on practical classes taught in all courses of Phase 1. It consists of three practical exams conducted during the Phase, which together provide the 50% for this component. The three exams are held at the end of Yr 1 and at the middle and end of Yr 2. Each practical exam consists of four separate discipline-focused tests (Anatomy/Neuroanatomy; Biochemistry/Microbiology/Genetics; Histology/Pathology/Embryology; Physiology/Pharmacology). Questions may be objective items, short answers, or may require some practical manipulation of objects or data. All questions will relate to material covered in practical classes in the preceding courses, and the weighting given to different disciplines will broadly reflect the frequency of practical classes in that discipline within the Phase. Students must achieve a cumulative pass in each discipline focus in order to pass this component.

Feedback on your progress in the program

Learning in the program will be integrated, collaborative and student-centred. You will be studying many disciplines in each course, working regularly with other students on group projects and other group activities, and having to make many decisions about your study for yourself. The responsibility for keeping up with your study, for knowing when and how much you need to study and even, to some extent, what it is most important for you to study, will be up to you. This might be different from your experience of learning at school. In these circumstances feedback on your progress is very important.

Feedback will help you to identify areas of strength and weakness, to plan your study, and to develop a critical self-evaluation of your progress in the program. It is customary to distinguish between assessments that give you feedback about your learning (formative assessments) and assessments that are used to determine course results and progression (summative assessments). However you can use all assessments, regardless of their intent, to get feedback on your progress.

You will receive feedback from many sources in the program. You will need to learn how to interpret what this feedback is telling you so your studies can benefit. The main sources of feedback in the program are:

- The assessments of your assignments and projects: you will get a grade and feedback for each of the five capabilities addressed in each item. You will also get an overall grade and comment.
- Feedback submitted by your peers to the Teamwork system on your contributions to your project group.
- Feedback submitted by your facilitators to the Teamwork system on your scenario group contributions.
- The results you achieve in the online formative feedback quizzes in each course (see below).
- The results you achieve in the end of course examinations: these together with the exam feedback and the histogram of results for the whole class will give you feedback on your progress in mastering the medical science and social and cultural aspects of the program, and on your relative standing in the class.
- The results you achieve in the End of Phase portfolio, written, practical and clinical skills examinations: these will give you feedback on your learning in the Phase before you progress to the next stage of your training.
- Your own judgments about how you are going and what you need to do to succeed in the program.

It is important that you learn to use all this feedback to get an accurate picture of your learning and development in the Phase, and to guide your study towards areas of difficulty and challenge. This will help you prepare for the summative course and Phase examinations, and for your work in later Phases of the program. The aim for the Self-direction and Critical Evaluation capability is that, by the time you graduate and become an Intern, you will be able to control your own learning: to identify what you need to learn, to plan and to implement an effective learning program. These are essential skills for all professionals, including medical practitioners.

Online Formative Feedback Assessment

In order to provide additional informative feedback on your progress, integrated online self-assessments in the medical and social sciences will be available in Phase 1. The online formative assessments are designed to help you appreciate the nature and scope of questions likely to arise in the end of course examination.

Specifically, they will help you to:

- analyse familiar health scenarios in terms of the underlying pathophysiology and psychosocial effects of illness;
- explain the clinical manifestations of unseen health scenarios on the basis of integrated knowledge of the medical and social sciences;
- evaluate your understanding of the medical and social sciences in a clinically relevant context.

Most courses have at least one formative online assessment, some have multiple. These can be accessed from the Moodle site for each course in Phase 1. Each formative assessment is based on health scenarios similar to those explored during the course and employs questions that match as closely as possible to the associated learning objectives for each scenario, thereby providing a personal guide to your progress as well as indicating topics you should focus on before the end of course examination. However, you should be aware that all course material is examinable, whether or not it is specifically covered in the formative assessments.

These assessments are intended to be enjoyable learning experiences, which you may attempt on multiple occasions in order to achieve mastery of the material. The formative nature of these assessments means that they do not contribute to the overall grade for a course. However, the nature and format of the questions might provide a guide as to the standard expected in the end of course examinations.

Progression

With respect to the Rules of Progression through Phase 1 and progression to Phase 2, you need to be aware that Phase 1 is a vertically integrated program, parts of which run over a 2-year cycle. The content, teaching activities and assessments for Phase 1 courses in teaching periods 3 and 4 differ between even and odd numbered years. It is very important that you recognize that the 2-year nature of the Phase 1 program effectively means that the content areas within individual courses in teaching periods 3 and 4 are **only offered every second year**. You must pass all eight Phase 1 courses and the End of Phase examinations to progress to Phase 2 of the program.

You need to be aware that interrupting your enrolment in Phase 1 courses, either through deferment of enrolment, taking leave, or illness resulting in non-completion of one or more courses, will have implications for your progression through Phase 1 and potentially lengthen the time required to progress to Phase 2. Given the complexities that exist, it is essential that if you are considering taking leave or deferring enrolment, you must seek advice from the Faculty Student Office (MESO) or the Phase 1 convenor on the implications for your progression through Phase 1.

You have a maximum of 12 teaching periods (i.e. 3 years) to complete Phase 1. Details on the Rules of Progression are available on the Medicine website. <http://medprogram.med.unsw.edu.au/progression>

Failing an Assignment or Project

To be eligible to present your Portfolio for examination at the end of Phase 1, you must have obtained an overall P- or higher grade in a minimum of 11 formal projects and assignments, of which at least five must be assignments. The evidence for your portfolio must include a negotiated assignment.

If you fail any project or assignment, you can discuss possible remedial action with the relevant Course Convenor, who may permit you to submit an additional project or assignment for the course. If you wish to contact the Course Convenor, **you must do so within 10 working days of receiving your fail grade**. If you do not approach the Course Convenor within this time period, you will forfeit the opportunity to resubmit. Note that failure in a resubmitted project or assignment counts as an additional failure.

If a pattern of poor grades occurs in a particular capability, you should consult your Portfolio Advisor.

Failing an End of Course examination

If you fail **one** end of course examination in either Year 1 or Year 2, you may be given a supplementary assessment which you must pass to progress. The maximum mark that will be awarded in a supplementary examination is 50%. If you fail more than one end of course examination in either Year 1 or Year 2, you will not be allowed a supplementary examination and you will be required to repeat these courses. If you fail a supplementary assessment you will be required to repeat the course.

Because of the 2-year structure of Phase 1, the content areas within courses in teaching periods 3 and 4 are **offered only every second year**. This means that in exceptional circumstances, the Assessment Review group may permit Yr 2 students who have fulfilled all other requirements to sit a supplementary examination or an Individual Study Program (ISP) in the summer teaching period (STP) in one additional failed course.

Repeating a course

If you are required to repeat a course in Phase 1, you need to complete it in its entirety. This includes attending and engaging in classes and completing an assignment and a project. You should ensure that you choose different topics for your assignment and project from those you completed when you did the course previously. To keep your communication skills current, it is recommended that repeating students complete at least one additional SOCA for each two repeated courses. Repeating students should consult with the Phase 1 convenor to discuss whether they should be repeating any of the progressive practical examinations.

Failing an End of Phase examination

If you fail the Portfolio Examination you will be given an opportunity to resubmit a revised portfolio for supplementary assessment. If the revised portfolio is still unsatisfactory, you will be required to complete additional work prescribed by the Phase 1 Assessment Review Group and to subsequently re-submit your portfolio for final examination. This may delay your progress to Phase 2.

If you fail either the Written Examination and/or the Clinical Skills Examination, you will be required to do additional work prescribed by the Phase 1 Assessment Review Group and to re-sit the examination(s). If you do not achieve a satisfactory level of performance at any of these further assessments, you will exit from the Medicine Program, but may be eligible to transfer to the Bachelor of Science (Medicine) [BSc (Med)] Program.

Special consideration for examinations

If you are ill or there are other extenuating circumstances that you think will significantly impair your performance in an examination, you should apply for special consideration through Online Services in myUNSW (<https://student.unsw.edu.au/special-consideration>) and include supporting documentation. Your application will be considered by the relevant Assessment Review Group, and if accepted will result in you being granted a supplementary examination in the event that you fail the initial examination. Special consideration is not usually available for supplementary exams.

Preparing for Phase 2

In Year 2, you will have the opportunity to submit allocation preferences for clinical schools during your Phase 2 Clinical Course year. Students allocated to a metropolitan clinical school will be further assigned to the four sequences of the Phase 2 Clinical Course year by eMed.

Students allocated to a metropolitan clinical school should note that clinical placements in the S&H Term and BGD Term may be different and you will be advised about this separately.

Each of the Rural Clinical School (RCS) sites runs their own sequence; students will follow the sequence run at the RCS site to which they have been allocated. Students allocated to a rural clinical school site should note that you will be at the rural campus for the entire clinical coursework year.

The Program website contains detailed information on the process for Phase 2 Clinical Allocations:

<https://medprogram.med.unsw.edu.au/allocation-clinical-teaching-sites>

You need to adhere to the procedures and deadlines set by the Faculty when applying for your allocation.

<https://medprogram.med.unsw.edu.au/enrolment>

If you are considering taking program leave between Phase 1 and Phase 2, you must discuss this with the Faculty Student Office (MESO).

Convenors in Phase 1

	Convenor	Co-convenor(s)
Phase 1	Dr Karen Gibson k.gibson@unsw.edu.au	
Foundations	Dr Megan Kalucy m.kalucy@unsw.edu.au	A/Prof Linda Ferrington l.ferrington@unsw.edu.au
Beginnings, Growth and Development A	Dr Nicole Marden n.marden@unsw.edu.au	Dr Lesley Ulman l.ulman@unsw.edu.au Dr Martin Weber m.weber@unsw.edu.au
Beginnings, Growth and Development B	Dr Vita Birzniece v.birzniece@unsw.edu.au	Martin Le Nedelec m.lenedelec@unsw.edu.au Dr Trevor Lewis t.lewis@unsw.edu.au
Health Maintenance A	Dr Trudie Binder w.binder@unsw.edu.au	A/Prof Shane Thomas Shane.thomas@unsw.edu.au
Health Maintenance B	Dr Trudie Binder w.binder@unsw.edu.au	A/Prof Shane Thomas shane.thomas@unsw.edu.au
Ageing and Endings A	Prof Nalini Pather n.pather@unsw.edu.au	Dr Frederic von Wegner f.vonwegner@unsw.edu.au
Ageing and Endings B	Prof Nalini Pather n.pather@unsw.edu.au	Dr Annelise Hulme a.hulme@unsw.edu.au Dr Teri Furlong t.furlong@unsw.edu.au
Society and Health	A/Prof Chinthaka Balasooriya c.balasooriya@unsw.edu.au	Judy Kell j.kell@unsw.edu.au Dr Kerry Warner kerry.warner@unsw.edu.au
Element – Clinical Skills	A/Prof Silas Taylor silas.taylor@unsw.edu.au	
Element - Ethics	Dr Vicki Langendyk v.langendyk@unsw.edu.au	
Element – Quality of Medical Practice	Dr Amir Ariff amir.ariff@unsw.edu.au	
Portfolio Examination	Dr Narelle Mackay n.mackay@unsw.edu.au	

For Phase 1 administrative issues please contact the Medicine Education and Student Office (MESO) - Phase1@unsw.edu.au

Faculty Wellbeing Officer

The Faculty Wellbeing Officer offers support services to UNSW Medicine students currently enrolled within the faculty either as undergraduate or postgraduate students. This role focuses on preventative programs including developing student's mental health literacy and awareness, advocacy and providing additional support and assistance if required.

There are several ways that you can obtain support for problems related to your studies or personal issues that may impact upon you getting the best out of your time in the Medicine program:

- If you are having difficulty with your studies please speak to the relevant course convenor, or phase convenor if the problem is related to more than one course, as an initial step.
- Students should prioritise registering with a GP as soon as is practicable
 - Bulk Billing GP practices within NSW can be found [here](#) or via [Aboriginal Medical Services](#).

Students are encouraged to seek help early and utilise the student support services on campus including:

- University Counselling and Psychological Services (<https://www.counselling.unsw.edu.au/>),
- University Health Service, <http://www.healthservices.unsw.edu.au/>
- Learning Centre, <http://www.lc.unsw.edu.au/>
- Student Equitable Learning Services. (<https://student.unsw.edu.au/els/>)

You are also encouraged to consider making contact with the support services for [international students](#) and [rural students](#), if applicable.

If you experience problems in accessing these services and feel that you require additional support, please get in contact with the Faculty Wellbeing Officer. The officer can: assess the student's problem and needs; provide advice; co-ordinate appropriate help both on and off campus if required; and act as an advocate for the student in their interaction with the Faculty, or other authorities, as needed. Accessing support through the Faculty Wellbeing Officer is not intended to be on a long-term basis. Given the high demand for support services, the Faculty Wellbeing Officer provides short-term assistance on as needs basis. Where more intensive or long-term support is needed, the Faculty Wellbeing Officer can assist you in accessing the external support services outlined above.

Faculty Wellbeing Officer

E: medfwo@unsw.edu.au

Information given to the Student Wellbeing Officer will be regarded as confidential.

The Faculty may also require a student to see the Faculty Wellbeing Officer or the Counselling and Psychological Services, if there is a concern about academic progress or fitness to practice.

Further information about student wellbeing is available in the Current Students section on UNSW Medicine website. <https://med.unsw.edu.au/student-life/wellbeing>

Prescribed Textbooks for Phase 1

Students are expected to purchase the prescribed texts or access online versions via UNSW Library. UNSW Medicine textbooks can be purchased from the UNSW Bookshop. Other recommended texts are optional and listed on the website:

<https://medprogram.med.unsw.edu.au/learning-resources>

Anatomy/Histology/Embryology

Drake, R.L., Vogl, W. & Mitchell, A.W.M. (2019). Gray's anatomy for students (4th ed.). Philadelphia; London : Churchill Livingstone / Elsevier.

[[Electronic access via UNSW Library](#)] - online access to 3rd edition.

OR

Snell, R.S. (2007). Clinical Anatomy by Systems. (7th ed.). Philadelphia: Lippincott Williams & Wilkins.

Mescher, A. (2021). Junqueira's Basic Histology: Text and Atlas, (15th ed.). New York: McGraw Hill.

[[Electronic access via UNSW Library](#)]

OR

Young, B., Lowe, J.S., Stevens, A. and Heath, J.W. (2013). Wheater's Functional Histology (6th ed.). Edinburgh: Elsevier Churchill Livingstone.

[[Electronic access via UNSW Library](#)]

Moore, K.L., Persuad, T.V.N., Torchia & M.G. (2015). The Developing Human: clinically oriented embryology (10th ed.). Philadelphia: Saunders.

[[Electronic access via UNSW Library](#)]

Crossman, A.R. and Neary, D. (2015). Neuroanatomy: an illustrated colour text (5th ed.). Edinburgh: Elsevier Churchill Livingstone.

[[Electronic access via UNSW Library](#)]

OR

Nolte, J. (2010). Essentials of the Human Brain. Philadelphia: Mosby Elsevier.

[[Electronic access via UNSW Library](#)] [Single user only]

NB: The lengthier, Vanderah, T. & Gould, D. (2015). Nolte's The Human Brain: an introduction to it's functional anatomy. (7th ed.). is available online. [[Electronic access via UNSW Library](#)]

Biology

Urry, L.A., Meyers, N., Cain, M.L., Wasserman, S.A, Minorsky, P.V. and Reece, J.B. (2017). Campbell Biology (11th ed. Australian and New Zealand version). Frenchs Forest, N.S.W. : Pearson Australia

[[Electronic access via UNSW Library](#)]

OR

Principles of Biology. Nature Education Publishing Group.

(UNSW Bookshop sells access codes to this electronic text)

NOTE: Access to one of these texts is recommended for students without a strong background in biology

OR

Alberts, B., Bray, D., Hopkin, K., Johnson, A., Lewis, J., Raff, M. Roberts, K. and Walter, P. (2014). Essential Cell Biology (4th ed.). New York: Garland Science.

Biochemistry

Tymoczko, J.L., Berg, J.M. & Stryer, L. (2015). Biochemistry: a short course (3rd ed.). New York : W. H. Freeman and Co.

Clinical skills

Epstein, O., Perkin, G.D., Cookson, J. and deBono, D. (2008). Clinical Examination (4th ed.). Edinburgh; New York: Mosby.

[[Electronic access via UNSW Library](#)]

Silverman, J., Kurtz, S. and Draper, J. (2013). *Skills for Communicating with Patients* (3rd ed.). Abingdon, Oxon, UK; New York: Radcliffe Medical Press.

[\[Electronic Access via UNSW Library\]](#)

Ethics and the Law

Kerridge, I.H., Lowe, M. and Stewart, C. (2013). *Ethics and Law for the Health Professions* (4th ed.). Annandale, N.S.W.: Federation Press.

Immunology

Kumar, V., Abbas, A.K., and Aster, J. (2018). *Robbins' Basic Pathology* (10th ed.). Philadelphia, PA: Elsevier Saunders.

[\[Electronic access via UNSW Library\]](#)

Microbiology

Goering, R., Dockrell, H., Zucherman, M., Roitt, I. and Chiodini, P. (2019). *Mims' Medical Microbiology* (6th ed.). London; Philadelphia: Saunders..

[\[Electronic access via UNSW Library\]](#)

NOTE: This is the preferred text, the alternative below does not have the same depth of coverage.

OR

Lee, G. & Bishop, P. (2016). *Microbiology and infection control for health professionals* (6th ed.). Frenchs Forest, N.S.W: Pearson Education.

[\[Electronic access via UNSW Library\]](#)

Pathology

Kumar, V., Abbas, A.K., and Aster, J. (2018). *Robbins' Basic Pathology* (10th ed.). Philadelphia, PA: Elsevier Saunders.

[\[Electronic access via UNSW Library\]](#)

For additional reading:

Kumar, V., Abbas, A.K., & Aster, J.C. (2021). *Robbins and Cotran Pathologic Basis of Disease* (10th ed.). Elsevier. The 9th edition is available as an e-book via UNSW Library:

[\[Electronic access via UNSW Library\]](#)

Pharmacology

Brunton, L. L., Hilal-Dandan, R., & Knollmann, B. C. (2018). *Goodman & Gilman's the pharmacological basis of therapeutics* (13th ed.). McGraw-Hill Education..

[\[Electronic access via UNSW Library\]](#)

Physiology

Koepfen, B.M & Stanton, B.A. (2018). *Berne & Levy Physiology* (7th ed.). Philadelphia, PA: Elsevier.

[\[Electronic access via UNSW Library\]](#)

Public Health

Keleher, H. and MacDougall, C. (2015). *Understanding health*. (4th ed.). South Melbourne, Vic.: Oxford University Press.

[\[Electronic access via UNSW Library\]](#)

Quality of Medical Practice

Straus, S.E., Richardson, W.S., Glasziou, P., Richardson, W.S. and Haynes, R.B. (2019). *Evidence-based Medicine: How to Practice and Teach EBM* (5th ed.). Edinburgh: Churchill Livingstone.

[\[Electronic access via UNSW Library\]](#)

Other requirements

<i>Clinical Skills</i>	<i>Practical Labs</i>
Stethoscope Reflex Hammer Pen torch	White lab coat Enclosed shoes

Phase 1 Recommended Textbooks:

<https://medprogram.med.unsw.edu.au/learning-resources#tab-303400240>

Ethics recommended Resources & Textbooks:

<https://medprogram.med.unsw.edu.au/learning-resources#tab-303400237>