

School	SCHOOL OF MEDICINE
Subject Code and Name	MEDI3003 – Integrated Clinical Rotations 1
Subject Coordinator	Scott MacKenzie
Teaching Session Details	Yearlong 1H and 2H 2023
Handbook Summary	<p>Integrated Clinical Rotation 1 is the first major clinical year of the MBBS program. It consists of ten weeks in Surgery, Medicine and Medicine in Context (MiC) and five weeks in Critical Care. Surgery, Medicine and Critical Care attachments will be at Campbelltown, Blacktown, Mt Druitt, Bankstown, Fairfield and Liverpool hospitals. In Surgery and Medicine students spend five weeks in each of two sub-specialties. In Critical Care students spend time in Emergency and Anaesthetic Departments. The 10-week MiC attachment is conducted in two 5-week blocks and involves community-based aspects of the health care system including community organisations and general practice. Students also have three Conference Weeks; tutorials in clinical communication skills; and undertake an assignment in Evidence-Based Medicine and 3 online Scientific Streams learning modules.</p>
Subject Level	3
Credit Points	80
Assumed Knowledge	None
Pre-Requisites	MEDI2003/MEDI2002 -Clinical Sciences 2/Foundations of Medicine 2
Co-Requisites	Please refer to Subject Enrolment Restrictions
Enrolment Restrictions	<p>Students must be enrolled in 4641 Bachelor of Medicine/Bachelor of Surgery</p> <p>Students are also expected to meet the inherent requirements of the program as outlined in the Western Sydney University Inherent Requirements for Medicine Programs: https://www.westernsydney.edu.au/ir/inherent_requirements/inherent_requirements_for_medicine_courses</p> <p>Inherent requirements are the fundamental components of a Program or Subject, that are necessary to demonstrate the capabilities, knowledge and skills essential to achieve the core learning outcome of the Program or Subject, while preserving the academic integrity of the university's learning assessment and accreditation processes. The Disability Education Standard, Section 3.4 (3) states: "In assessing</p>

whether an adjustment to the Course, Unit of the Course or program in which the student is enrolled, or proposes to be enrolled, is reasonable, the provider is entitled to maintain the academic requirements of the Course or program, and other requirements or components that are inherent in or essential to its nature. Note: In providing for students with disabilities, a provider may continue to ensure that integrity of its Courses or programs and assessment requirements and processes, so that those of whom it confers an award can present themselves as having the appropriate knowledge, experience and expertise implicit in the holding of that particular award."

Special Requirements-Legislative pre-requisites

Prior to enrolling in this subject, students must have obtained all the necessary documentation to be verified by NSW ClinConnect. This verification is a requirement of NSW Health for all students enrolled in medical programs. If a student fails to produce this documentation to ClinConnect they will be unable to attend their hospital tutorials and placements. Attendance at the hospital is a mandatory requirement of the Subject and failure to attend will result in a Fail Grade of the Subject. The documents that are to be provided to ClinConnect are:

1. National Police Certificate
2. Adult Health Immunization Schedule
3. Code of Conduct Agreement

[NSW Health Student Compliance Information](#)

Special Requirements-Essential Equipment

Students are required to have Stethoscope, Pencil Torch and Watch with a second hand or display.

Subject incompatible with and not to be counted for credit with

Not Applicable

Attendance Requirements

Attendance is required for accreditation of the MBBS program by the Australian Medical Council (AMC) as outlined in the AMC "Accreditation Standards for Primary Medical Education Providers and their Program of Study and Graduate Outcome Statements" section 4.3 and 4.4 which states:

- 4.3. The medical program enables students to develop core skills before they use these skills in a clinical setting.
- 4.4. Students have sufficient supervised involvement with patients to develop their clinical skills to be required level and with an increasing level of participation in clinical care as they proceed through the medical program.

Subject Content

1. Three Conference Weeks
2. Ten weeks of Surgery in two hospital attachments
3. Ten weeks of Medicine in two hospital attachments
4. Ten weeks of Medicine in Context in community-based attachment
5. Five weeks of Critical Care in one hospital attachment
6. Three Scientific Streams online learning packages (25 hours each)

7. One Evidence-Based Medicine project

Learning Outcomes

As years 3-5 of the MBBS program are an integrated whole and students will undertake various aspects of the clinical and community programs asynchronously in any of the three years it is not possible to divide the learning outcomes on a year by year basis. However, each of the attachments will have their own learning outcomes which will be made explicit to students in Attachment Descriptors. The overall subject learning outcomes are presented below. On successful completion of the MD program, students should be able to:

#	Program Learning Outcomes
1	<p>Patient Care: Communication</p> <p>Provides patient centred care as a member of an interdisciplinary team under appropriate supervision.</p> <p>1.1 - Communicates empathically and effectively with patients, families and health care team members to interact, negotiate, learn and foster understanding.</p> <p>1.2 - Establishes trusting relationships and communicates sensitively, empathically and effectively, without prejudice, with individuals and families from diverse backgrounds.</p> <p>1.3 - Creates and manages communication and information in all media, for example orally, in writing, electronically, by telephone.</p>
2	<p>Patient Care: Patient Assessment</p> <p>Provides patient centred care as a member of an interdisciplinary team under appropriate supervision.</p> <p>2.1 - Assesses patient health needs, attending to physical, functional, social, cultural and psychological factors.</p> <p>2.2 - Gathers a relevant and comprehensive patient history, generating and testing differential diagnoses</p> <p>2.3 - Performs an accurate and appropriate clinical examination, testing & refining differential diagnoses</p> <p>2.4 - Synthesises clinical findings to develop prioritised differential diagnoses and a comprehensive problem list</p> <p>2.5 - Selects, justifies and interprets investigations to evaluate likely diagnoses.</p>
3	<p>Patient Care: Patient Management</p> <p>Provides patient centred care as a member of an interdisciplinary team under appropriate supervision.</p> <p>Develops, implements and monitors a management plan through a process of shared decision making which addresses the patient's unique medical, psychological and social needs and preferences:</p> <p>3.1 - Formulates and implements (under supervision) a comprehensive management plan.</p> <p>3.2 - Ensures that management addresses the patient's unique psycho-social, functional & cultural needs and preferences.</p> <p>3.3 - Explores the role of integrative and complementary therapies utilised by patients for their health care.</p> <p>3.4 - Monitors the effectiveness of management and provides continuity of care throughout the duration of clinical responsibility.</p> <p>3.5 - Makes timely, informed and rational decisions in circumstances of uncertainty according to best practice.</p> <p>3.6 - Performs an appropriate range of technical and practical procedures safely and effectively.</p> <p>3.7 - Prescribes and administers an appropriate range of medications and other therapeutic agents safely and effectively.</p>

	<p>3.8 - Recognises, assesses, initiates management and seeks assistance for deteriorating and critically unwell patients who require immediate care.</p>
4	<p>Health in the Community: Determinants of Health & Illness Promotes the health and wellbeing of individuals and populations, with particular focus on Greater Western Sydney, rural, regional and Aboriginal and Torres Strait Islander Australia.</p> <p>4.1 - Evaluates the determinants of health and illness in populations. 4.2 - Explains how health inequities arise from the interplay of biological, socio-economic, behavioural, sociocultural and environmental factors. 4.3 - Discusses and evaluates the major issues and trends confronting global health, their determinants and effects on individuals and populations.</p>
5	<p>Health in the Community: Health Needs Promotes the health and wellbeing of individuals and populations, with particular focus on Greater Western Sydney, rural, regional and Aboriginal and Torres Strait Islander Australia.</p> <p>5.1 - Analyses the health needs and priorities of communities and populations, taking into consideration the historical, cultural, social and political forces which impact on health and wellbeing. 5.2 - Evaluates a range of strategies, including patient and population-oriented approaches, for illness prevention and management, and health promotion. 5.3 - Demonstrates culturally sensitive communication and effective engagement with diverse communities and populations.</p>
6	<p>Health in the Community: Health Care Systems Promotes the health and wellbeing of individuals and populations, with particular focus on Greater Western Sydney, rural, regional and Aboriginal and Torres Strait Islander Australia.</p> <p>6.1 - Explains the roles of health agencies, services and providers and how they interact to provide health care to individuals and populations. 6.2 - Evaluates the effectiveness of health care systems and services in addressing individual and population needs and priorities</p>
7	<p>Health in the Community: Health Promotion Promotes the health and wellbeing of individuals and populations, with particular focus on Greater Western Sydney, rural, regional and Aboriginal and Torres Strait Islander Australia.</p> <p>7.1 - Promotes the health and well-being of individual patients and populations within the context of the culture, health status and health needs of the community of which that patient is a member. 7.2 - Articulates the role of advocacy and public policy in promoting and protecting health and preventing disease.</p>
8	<p>Health in the Community: Aboriginal Health Promotes the health and wellbeing of individuals and populations, with particular focus on Greater Western Sydney, rural, regional and Aboriginal and Torres Strait Islander Australia.</p> <p>8.1 - Explains how various factors, including historical, cultural and political, interact to influence the health of the Aboriginal and Torres Strait Islander peoples</p>
9	<p>Personal and Professional Development: Ethical Practice Demonstrates and develops professional skills, responsibilities and attitudes.</p> <p>9.1 - Aware of and adheres to accepted medical professional codes of conduct. 9.2 - Applies ethical principles in professional practice. 9.3 - Displays and reflects on, appropriate professional attitudes and values. 9.4 - Values patient autonomy, privacy and confidentiality. 9.5 - Aware of and complies with legal responsibilities and requirements, and the guidelines of regulatory bodies. 9.6 - Maximises patient safety, ensures quality care, and manages risk and adverse medical outcomes</p>
10	<p>Personal and Professional Development: Teamwork Demonstrates and develops professional skills, responsibilities and attitudes.</p> <p>10.1 - Works effectively and cooperatively as a member of a multidisciplinary team and as a member of the health care system.</p>

11	<p>Personal and Professional Development: Learning and Teaching Demonstrates and develops professional skills, responsibilities and attitudes. 11.1 - Engages in self and peer evaluation, lifelong learning and teaching.</p>
12	<p>Personal and Professional Development: Personal Needs Demonstrates and develops professional skills, responsibilities and attitudes. 12.1 - Recognises own personal, physical and emotional needs and is aware of the pathways available for assistance.</p>
13	<p>Personal and Professional Development: Medical Humanities Demonstrates and develops professional skills, responsibilities and attitudes. 13.1 - Engages in scholarship of the arts and humanities to interpret the diverse human experience of health, illness and medical care.</p>
14	<p>Scientific Basis of Medicine: Applies Science to Practice Develops and applies a sound understanding of the scientific foundations (social, basic and clinical) of medical practice. 14.1 - Applies an understanding of the social and biomedical sciences to the assessment and management of the health needs of individuals and populations: 14.2 - Demonstrates an understanding of the body as a complex adaptive biological system. 14.3 - Applies an understanding of the basic, social and clinical sciences to clinical reasoning. 14.4 - Explains the underlying mechanisms of health problems. 14.5 - Explains the underlying mechanisms of investigative and therapeutic measures, including emerging technologies. 14.6 - Applies an understanding of the psychological and social sciences to interpret health and illness within a social and cultural context.</p>
15	<p>Scientific Basis of Medicine: Uses Evidence Develops and applies a sound understanding of the scientific foundations (social, basic and clinical) of medical practice. 15.1 - Seeks, critically appraises and applies best available evidence relevant to health and illness in individuals and populations.</p>
16	<p>Scientific Basis of Medicine: Research Develops and applies a sound understanding of the scientific foundations (social, basic and clinical) of medical practice. 16.1 - Takes opportunities to engage in research and scientific endeavor. 16.2 - Applies an understanding of research rigor by formulating answerable research questions, selecting appropriate study designs, synthesising, critically analysing and disseminating research findings. 16.3 - Applies an understanding of ethical principles, and relevant guidelines and laws, to the conduct of research.</p>

Assessment items and weighting

Assessment Item	Type of Assessment	Length/ Duration	Group (G)/ Individual (I)	Program Learning Outcomes	Percentage	*Threshold Y/N (see c)
1 Medicine Attachment	Medicine Attachment makes up 15% of Overall subject grade			1-4	15%	Y
1a Clinical Attachment Assessments (CAA) x 2	Professional Placement Performance		I	1-4	100% of attachment	Y
2 Surgery Attachment	Surgery Attachment makes up 15% of Overall subject grade			1-4	15%	Y
2a Clinical Attachment Assessments (CAA) x 2	Professional Placement Performance		I	1-4	100% of attachment	Y
3 Critical Care Attachment	Critical Care Attachment makes up 7.5% of Overall subject grade			1-4	7.5%	Y
3a Clinical Attachment Assessments (CAA)	Professional Placement Performance		I	1-4	100% of attachment	Y
4 MiC Attachment	MiC Attachment makes up 12.5% of Overall subject grade			1-4	12.5%	Y
4a Community Assessments	See sub-components 4a-1, 4a-2 and 4a-3					Y
4a-1 Community Placement Assessment	Professional Placement Performance		I	1-4	30% of Attachment	N
4a-2 Tutorial Assessment	Participation	Weekly	I	1-4	10% of Attachment	N
4a-3 Essay	Written Assessment	2000-2500 words	I	1-4	20% of Attachment	N
4b GP Assessments	See sub-components 4b-1 and 4b-2					Y
4b-1 GP Clinical Placement Assessments (CAA) (x2)	Professional Placement Performance		I	1-4	20% of Attachment	N
4b-2 Mini-CEX (x4)	Professional Task	30 minutes each	I	1-4	20% of Attachment (5% each)	N

Assessment Item	Type of Assessment	Length/Duration	Group (G)/ Individual (I)	Program Learning Outcomes	Percentage		*Threshold Y/N (see c)
5 EBM Assignment			I	1-4	S/U		Y
5a EBM Case Study	Case Study	1200 words	I	1-4	S/U		Y
5b EBM Viva	Viva Voce	20 mins	I	1-4	S/U		Y
6 Scientific Streams	Quiz On-line completion	75 hours	I	1-4	S/U		Y
7	Paper A: SAQ/MEQ	Final Exam - Short Answer and Modified Essay Questions	I	1-4	15%	30%	Y**
	Paper B MCQ	Final Exam - Multiple Choice Questions	I	1-4	15%		
8	Clinical Skills Examination	Professional Task Objective Structured Clinical examination (OSCE) or equivalent	I	1-4	20%		Y
9	Long case	Presentation Oral case presentation and discussion with examiner	I	1-4	S/U		Y
10	Attendance	Professional Task	I	1-4	S/U		Y
11	Professionalism	Professional Task	I	1-4	S/U		Y

*Threshold: Threshold assessments are compulsory requirements within Integrated Clinical Rotations 1 that must be met in order to pass the subject. They include mastering professional skills and / or attainment of required professional attributes and are non-graded. Failure to satisfactorily complete a threshold requirement will result in a fail grade for the subject.

To be awarded a passing grade in ICR 1, students must complete all assessments in the table above and achieve an aggregate score of 50% or higher (after standard setting has been applied) in the weighted assessments outlined in the table above and satisfactorily complete all the thresholds. In addition, students must:

- **Have attained an aggregate mark of 50% or higher (after standard setting has been applied) in Papers A – B.
- Have attained a mark of 50% or higher (after standard setting has been applied) in the OSCE or equivalent. An equivalent examination could be the Structured Online Viva (StOVi) used in 2020. Students who fail to achieve 50% in the OSCE or equivalent will be required to complete a remediation program, followed by a supplementary OSCE or equivalent. Students must achieve an average mark of 50% or higher (after standard setting has been applied) in order to pass the supplementary OSCE or equivalent. If a student passes the supplementary OSCE or equivalent, the final mark for the OSCE or equivalent will be recorded as 50%. If a student fails the supplementary OSCE or equivalent, they will receive a Fail grade for ICR1.
- Have attained a satisfactory or above satisfactory grade for each 5-week Medicine, Surgery and Critical Care attachment. Borderline rating requires discussion with Clinical Dean and Year Co-ordinator. If a student fails an attachment, they will be given one opportunity to remediate the attachment as prescribed by the Head of Discipline. If the student passes the remediation, the maximum mark that will be awarded for the attachment is 50%. If a student fails the remediation, they will receive a Fail grade for ICR1.

- Have attained a mark of 50% or higher in both components of the MiC attachment assessments (Community Assessments and GP Assessments). If a student fails one or both MiC component/s, they will be given one opportunity to undertake a Supplementary Task for the failed component/s. The nature of the Supplementary Task will be determined by the MiC Convenor (for the Community Assessments fail) and the MiC GP Academic (for the GP Assessments fail). The maximum component mark after the supplementary task is 50%. If the Supplementary Task/s is Unsatisfactory, the student fails the MiC Attachment and may be offered one opportunity for remediation. The nature of the remediation will be determined by the MiC Convenor. The Maximum grade that can be awarded for the MiC Attachment after remediation is 50%. If a student fails the remediation, they will receive a fail grade for ICR1.
- Have not failed two or more attachments in ICR 1. If a student fails two or more attachments, on their first attempt, they will receive a Fail grade for ICR1.
- Have completed the Scientific Streams at a satisfactory level in the designated timeframe. Students with unsatisfactory participation or more than two warnings for late submission of work will be given one chance at remediation by the Scientific Stream coordinator. Failure to satisfactorily complete the remediation task for the Scientific Streams will result in an 'Unsatisfactory' grade being given for this threshold assessment, resulting in Fail grade for the subject
- Have completed each component of the EBM Assignment at a satisfactory level in the designated timeframe. Students who receive an 'Unsatisfactory' grade will be given opportunity to remediate. Failure to satisfactorily complete the remediation task(s) will result in an 'Unsatisfactory' grade being given for this threshold assessment, resulting in Fail grade for the subject.
- Have met the attendance requirements as outlined in the School of Medicine Attendance Policy for Clinical Years available on the 2023 Program Hub on vUWS.
- Students must behave professionally at all times and comply with codes of conduct and policies for professional practice as outlined by:
- Code of Professional Conduct for Medical Students of Western Sydney University (available on the Course Hub)
 - Western Sydney University Student Code of Conduct Policy
<https://policies.westernsydney.edu.au/document/view.current.php?id=258>
 - Western Sydney University Student Misconduct Rule
<https://policies.westernsydney.edu.au/document/view.current.php?id=304>
 - NSW Ministry of Health
https://www1.health.nsw.gov.au/pds/ActivePDSDocuments/PD2015_049.pdf
 - The Australian Health Professional Regulation Authority "Good Medical Practice"
<http://www.medicalboard.gov.au/documents/default.aspx?record=WD10%2F1277&dbid=AP&checksum=eNjZ0Z%2FajN7oxjvHXDRQnQ%3D%3D>

Failure to uphold these inherent requirements and professional standards may result in the student being awarded a Fail grade for the subject.

- If a student withdraws from the subject prior to the session 1H census date no academic penalty is imposed, and no grade is recorded on the student's academic transcript. If a student withdraws from the subject during session 1H, after the census date, they will receive an 'E' grade (Fail Discontinued) on their academic transcript. The last date to discontinue after census is the Friday that is two weeks before the published start date of the exams for the session. For an explanation of the WSU grade award, please see https://www.westernsydney.edu.au/currentstudents/current_students/exams/results . Students who have satisfactorily passed 1H assessments will be awarded a Y grade (Continuing) until their final grade for the subject is determined after all assessments are completed for the subject. If a student has been awarded a Y grade (Continuing) in the subject, having completed at least one session of study, and subsequently withdraws from the subject, the Y grade will be converted to a 'F' grade (Fail) for the subject. In the event of serious illness or misadventure experienced by a student after the session 1H census date, the student may apply for a W grade (withdrawal without academic penalty) through the official University processes.

A student returning after a year of absence or repeating Year 3 in subsequent years cannot re-submit an assignment previously submitted during the year that was failed.

- There are multiple nominated assessments in the table above. During 2023, the School of Medicine may move to an overall non-graded assessment system, whereby all the above will contribute to a satisfactory or not satisfactory overall assessment for ICR1. This won't affect individual assessments, but will mean that an overall numeric grade will not be given. Satisfactory ("pass") means a good overall competent standard for ICR1.

Refer to the Assessment Policy

<https://policies.westernsydney.edu.au/document/view.current.php?id=227>

Mode of Delivery	Type	Hours
	Clinical Placements	35 hours/week
	Conference Week Lectures	40 hours x 3 weeks
	Scientific Streams	2.5 hours/week (75 hours in total)

Refer to the Learning Guide for further details on Mode of Delivery. Students can only attend the classes for which they are registered and places are allocated via the Tutorial Registration (Allocate+) system. Visit http://www.westernsydney.edu.au/currentstudents/current_students/enrolment/tutorial_registration for information on the timetable and tutorial registration

Online Learning Requirements

See Learning Guide for details of requirements

Prescribed Subject Textbook

The Western Sydney University MBBS is an integrated 5-year professional entry program which emphasizes life-long and self-directed learning. Accordingly, there are no prescribed textbooks for Subjects in the MBBS program. A list of recommended textbooks is available in the Subject Learning Guide.

Essential Readings

Students will make extensive use of the on-line text books already available in the library.