



# MChB Graduate Entry Course

Talking About... Learning & Teaching: Case Study 011



## University of Birmingham

**Start Date:** 2004

**Students:** Graduate entry Medicine and Surgery students

**Type:** Campus

**Discipline:** Medicine and Surgery

**Scope:** 1 year (7 modules)

**Technology:** WebCT, multimedia, anatomy models

**No. affected:** 40

**Approach:** Problem-based learning, self-directed learning, Lectures, Lab work, GP Firm 1 day teaching

**Learning Environment:** dedicated problem-based learning rooms, independent learning

**Initial Funding:** n/a

**Initiative Introduction:** programme wide

**Design Team:** R. Zvauya, C. Griffiths, C. Wright, A. Priestman, T. Knight, M. Stevenson

### Introduction

The four-year Medical and Surgery MChB Graduate Entry Course (GEC) is designed for graduates with a first degree in a life science (with an additional requirement for A-level chemistry). As with most other schools, students must have achieved first or upper-second class honours (top 20% graduates), although due to high demand all students accepted to the course to date attained first-class honours. In the first year students work on problem-based case studies as part of a group of about eight, with a tutor for your group. Each of student covers all aspects of the case studies. The problems are grouped into four to six week themed blocks covering basic science, anatomy (including prosection), ethics, medicine in society and behavioural science, with all these aspects integrated into each of the case studies.

### Learning Design

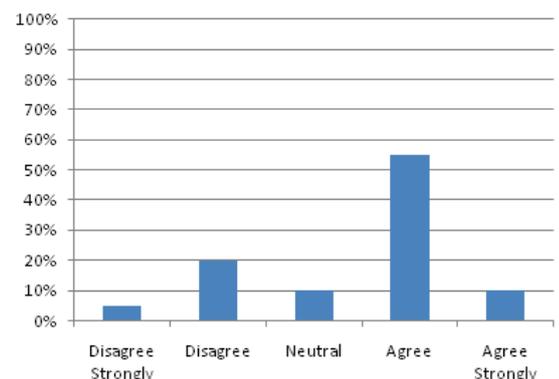
Over the year, students work in smalls group moderated by a range of different tutors (non-subject experts - mix of clinicians/scientists). Moderators change every module as do students groups, every two modules. Learning is designed in this way to prepare students for the way group working operates within the health service. A typical week might involve:

- A period of self-directed learning
- Presentations to the group of the results from the previous week's problem and discussing the problem for the next week
- Group work in anatomy, clinical skills and basic science
- Time for meeting subject experts and meeting your group tutor
- Lectures covering the context and concepts that underpin the themes of the blocks
- Time in primary care with direct patient contact to obtain the necessary communication and clinical skills

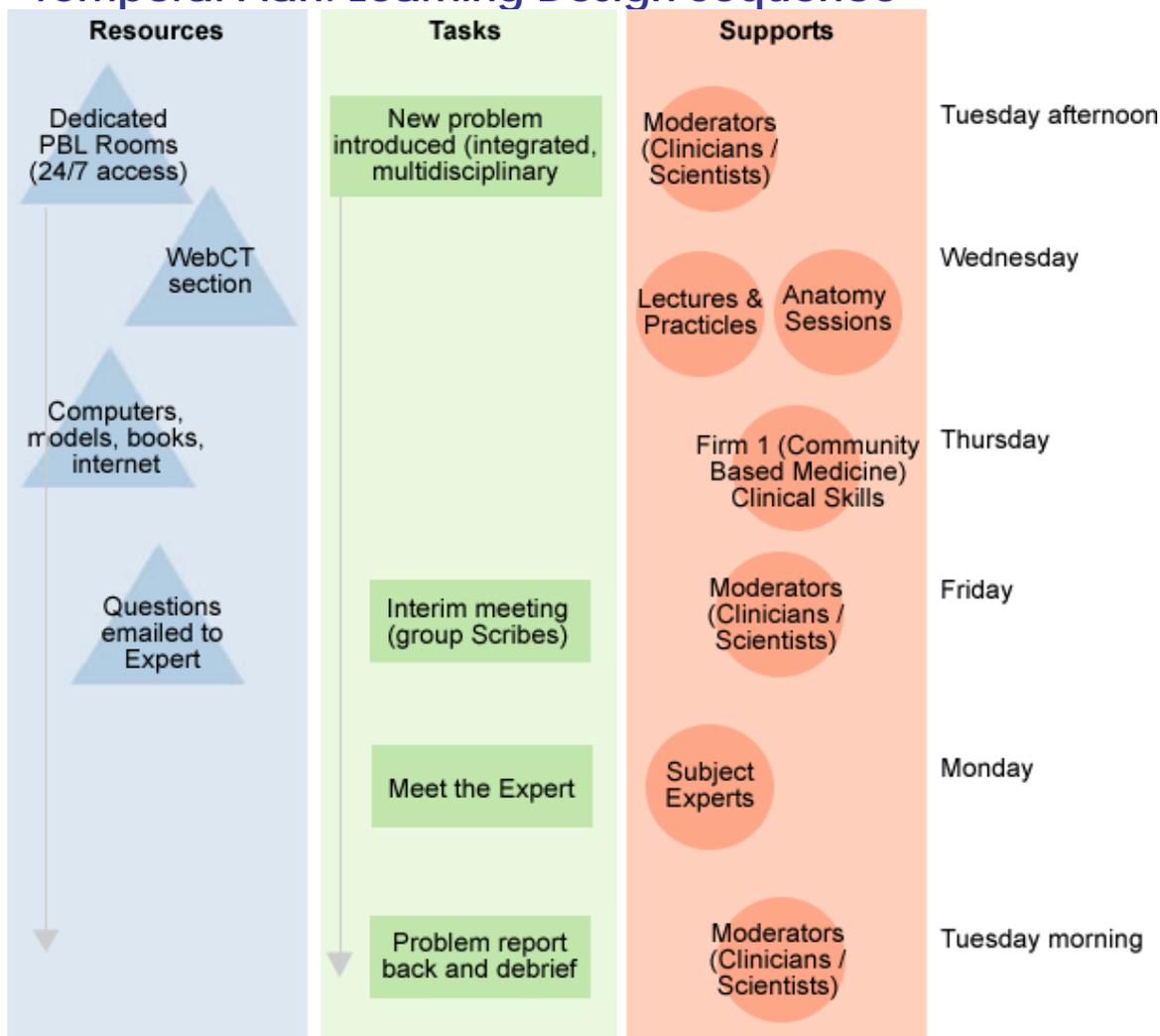
There are formative assessments each semester, together with feedback from tutors to assist student learning. At the end of the year there is a summative assessment on clinical skills, knowledge and interpretive aspects learning.

### Summary

Self-directed and problem-based learning skills are important in clinical years and in the health service. The programme has a end of year high-pass rate with most GEC students having higher grades in subsequent years. The graph (right) details student responses to the question: PBL format better than previous traditional HE courses.



## Temporal Plan: Learning Design Sequence



## References

Calvert, MJ. Ross, NM. Freemantle, N. Xu, Y. Zvauya, R. and Parle, JV. (2009) Examination performance of graduate entry medical students compared with mainstream students, *Journal of the Royal Society of Medicine*, 102 (10), pp. 425–430.

Further information available from <http://www.undergraduate.bham.ac.uk/coursefinder/medicine/medicine-grad-entry.shtml>

## Contact Information

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