

Practice in Primary Healthcare Departments and Services

Code: 104057
ECTS Credits: 3

Degree	Type	Year	Semester
2502442 Medicine	OT	2	0
2502442 Medicine	OT	3	0
2502442 Medicine	OT	4	0
2502442 Medicine	OT	5	0
2502442 Medicine	OT	6	0

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Use of Languages

Principal working language: catalan (cat)
Some groups entirely in English: No
Some groups entirely in Catalan: Yes
Some groups entirely in Spanish: No

Teachers

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External teachers

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Paula Gabriel Escoda

Silvia Fernandez Muñoz

Tamara Navarro Sierra

Prerequisites

The subject is developed in the second year, it is advisable that the student has reached the basic competences in cell biology, biochemistry and molecular biology, anatomy and physiology. Likewise, it is convenient to know the psychological bases of the states of health and disease and to have an adequate level of knowledge in interpersonal communication. The student will acquire the commitment, by signing a specific confidentiality document, the maintenance of confidentiality and the professional secrecy of the information and data and the images that can be accessed in the reason for the learning in the care services.

It also undertakes to maintain an attitude of professional ethics in all its actions. In the CAP of the Català de la Salut Intitut, there is a regulation that the student must provide, at the time of their incorporation to the practices,

a copy of not being included in the registry of sexual delitos of the Ministry of Justice.

This certificate is requested by the student in a personal, usually available online on the website of the Ministry of Justice.

Objectives and Contextualisation

This is an optional subject that can be studied from the second year and that has as a general objective that the student is familiarized, in real context, with the professional practice in the first level of care (PRIMARY HEALTH CARE),

with family doctors , pediatricians and other specialists, incorporated in the activities of a primary care center (CAP) or a social health center or accredited research team oriented to primary care, performing their own tasks in a supervised manner.

Internships can be carried out within the scope of all the teaching units and CAP or primary or socio-health care devices linked and available for each course.

Competences

Medicine

- Accept one's role in actions to prevent or protect against diseases, injuries or accidents and to maintain and promote health, on both personal and community-wide levels.
- Apply the principle of social justice to professional practice and demonstrate understanding of the ethical implications of health in a changing world context.
- Care for patients, families and the community in an effective and efficient manner, in accordance with professional ethics, with special emphasis on health promotion and disease prevention, as part of multidisciplinary teams.
- Communicate clearly and effectively, orally and in writing, with patients, family-members and accompanying persons, to facilitate decision-making, informed consent and compliance with instructions.
- Empathise and establish efficient interpersonal communication with patients, family-members, accompanying persons, doctors and other healthcare professionals.

- Engage in professional practice with respect for patients' autonomy, beliefs and culture, and for other healthcare professionals, showing an aptitude for teamwork.
- Listen carefully, obtain and synthesise relevant information on patients' problems, and understand this information.
- Perform the basic practical procedures of examination and treatment.
- Reason and make decisions in conflict situations of an ethical, religious, cultural, legal or professional nature, including those that stem from economic constraints, the marketing of health cures or scientific advances.
- Recognise the basic elements of the medical profession as the result of an evolving, scientific, social and cultural process, including ethical principles, legal responsibilities and patient-oriented professional practice.
- Recognise the professional values of excellence, altruism, sense of duty, compassion, empathy, honesty, integrity and commitment to scientific methods.
- Recognise, understand and apply the doctor's role as a manager of public resources.
- Use information and communication technologies in professional practice.

Learning Outcomes

1. Acquire the principles and values of good medical practice, both in health and in illness.
2. Adopt values of solidarity and service to others, both when dealing with patients and with the general public.
3. Apply medication orally, percutaneously, by inhalation, nasally, and by the otic and ocular routes.
4. Apply the epidemiological method to clinical and management decision-making, taking into account the principles of evidence-based medicine and cost-effectiveness.
5. Apply the principles of equity in all areas of application of public health.
6. Assess the health needs of the population.
7. Be self-critical and reflect on one's own learning.
8. Communicate appropriately with patients and their family-members.
9. Contextualise the responsibilities and tasks of healthcare professionals within the framework of public health (public administration, private sector, academic sector).
10. Define the motivational interview in the medical context.
11. Describe how health is not merely the absence of disease but also all physical, psychological and social conditions that allow maximum plenitude and autonomy of the person.
12. Describe the communication process and its effect on the professional caregiver-patient relationship.
13. Describe the main communicative skills for a clinical interview.
14. Describe the person as a multidimensional being in which the interplay of biological, psychological, social, environmental and ethical factors determines and alters the states of health and disease and their manifestations.
15. Detect how verbal and non-verbal behaviour can be linked in a context of patient-health professional relationship.
16. Develop teamwork skills.
17. Distinguish between the paternalistic conception of the doctor-patient relationship, deriving from the Hippocratic tradition, and the modern, more egalitarian approach which gives all protagonism to the patient.
18. Explain the role of the healthcare professional as a critical and empathetic agent of social change, working for the health of the community.
19. Identify the different professionals in the healthcare team, together with their profiles, functions and how they work together.
20. Identify the main activities of health promotion and disease prevention.
21. Identify the relationships between primary healthcare and the rest of the community health system.
22. Interact with other specialists in treating patients with a complex or multiorganic pathology.
23. Recognize one's own limitations and welcome help from colleagues in taking decisions on patient care.
24. Recognize the humanitarian aspect of activity in the service of health based on the doctor-patient relationship, both in care and in teaching and research.
25. Respect patients' religious, ideological and cultural convictions, unless these conflict with the Universal Declaration of Human Rights, and prevent one's own convictions from impinging on patients' decision-making capacity.
26. Use information and communication technologies in professional practice.

Content

Place where the subject is developed: Primary Care Center (CAP) or socio-health center or accredited research center

The student can choose, depending on the availability, to which primary care center

Three contexts are contemplated:

Clinical area

Internships in the area of Family Medicine and Pediatrics in the field of primary care

- the general aspects of the clinical relationship and the concepts of health and disease;
- the assistance methodology in the primary care setting;
- the basic aspects of the clinical interview and the different interview modalities;
- the etiology, physiopathology, semiology and clinical propaedeutics, laboratory and instrumental tests;
- the diagnostic and therapeutic procedures of the most frequent diseases;
- the functional exploration of the different devices and systems;
- the use of the techniques of the center or service;
- the surgical act; control of the consequences of surgery.

The clinical experience can be completed with assistance to clinical care

Integration in a line of research

The student can be integrated into research lines and teams to become a research

scientific and medical document search tasks and the management of biomedical databases.

During the scheduled stay, the student will record the most significant clinical

This documentation will be delivered at the end of the stay to the tutor of the same and will form the basis of its evaluation.

Methodology

The student joins the activities of a CAP or concerted center (6 days, 3 hours a day, clinical care practices and 3 hours of practicum assistance without guidelines), to observe and / or perform tasks of assistance, training or research, in a supervised way.

During the stay you will register the activity carried out in order to complete the summary portfolio of the stay.

This summary, together with the continuous evaluation of the tutor of the scheduled stay, will constitute the basis for the evaluation of the subject.

THE SCHEDULES AND DAYS OF STAY IN THE CAP OF THIS SUBJECT ARE DETERMINED ACCORDING TO THE HOURS AND PROGRAM OF THE SECOND COURSE OF MEDICINE. YOU WILL NOT BE ABLE TO MODIFY THE DATES OF THE STAYS THAT ARE COVENANTED WITH THE CAP AT THE BEGINNING OF THE COURSE TO ADAPT THEM TO THE ASSISTANCE PROCESS.

Mostly they are mixed schedules, although the programming is done in the afternoon and for 5 days because the program and schedules of the second course of medicine are followed.

This is especially specified for students of upper SECOND courses due to the incompatibilities of schedules with hospital practices.

Specific conditions for students of the Teaching Unit of Basic Medical Sciences (2nd year):

1. The period of stay in the CAP will be 5 days in the afternoon (30 hours: 6 hours x 5 days) This course will be in the AFTERNOON.

Students will NOT have to search for the CAP on their own, but will have to choose the CAP they want to go to from a list of available CAPs, using the PSG computer application, which is usually used in the Teaching Unit of Basic Medical Sciences to sign up for practices.

This election must be made during the first week of the semester, after the students have enrolled.

Teaching typology: clinical care practices and practicum without guidelines.

Activities

Title	Hours	ECTS	Learning Outcomes
Type: Directed			
PRACTICAL ASSISTANCE WITHOUT GUIDELINES (PEXT)	15	0.6	1, 5, 3, 2, 12, 16, 15, 17, 18, 7, 19, 20, 21, 22, 24, 23, 25, 26
Type: Supervised			
PREPARATION OF STUDIES / PERSONAL STUDY / READING OF ARTICLES / REPORTS OF INTEREST	15	0.6	4, 9, 10, 14, 13, 11, 6
Type: Autonomous			
ASISTENCIAL CLINICAL PRACTICES (PCAh)	41.25	1.65	9, 10, 14, 13, 11, 17, 18, 7, 24, 23, 25, 6

Assessment

The students enrolled in this subject will receive prior information in the UDCMB and the activities will be carried out in the coordinated primary care centers (CAP).

The CAP tutor will make an observational evaluation of 5 concepts about student learning and attitudes and 3 items about skill progression during the CAP stay (based on the 8 concepts, sum of 25 points maximum).

The person in charge of the subject will supervise these notes and in the doubtful cases he will be able to ask the students for a practical test.

To pass the subject, the student must have attended at least 90% of the activities programmed in the coordinated CAPs, and have a minimum positive evaluation of the tutor of 14 points on the total of 25 points.

The options for obtaining the excel·lència (Honors Registration) will depend on the obtaining of the maximum note in lotos, the sections (attendance and assessment of the tutor), the mention of excel·lència and the availability

of authorizaza e funció of the number of registrations. The coordination of the course reserves the possibility of requesting a research work on the subject of the subject for these possible cases.

Students who do not have accredited 95% of the activities programmed in the CAP will be considered as not evaluated and will exhaust the rights to the enrollment of the subject.

Assessment Activities

Title	Weighting	Hours	ECTS	Learning Outcomes
Assistance and active participation in classes and seminars	100%	3.75	0.15	1, 4, 5, 3, 2, 8, 9, 10, 12, 14, 13, 11, 16, 15, 17, 18, 7, 19, 20, 21, 22, 24, 23, 25, 26, 6

Bibliography

Consult the bibliography .:

GENERAL INFORMATION on Primary Health Care

<http://www.fmed.uba.ar/depto/medfam/bibliografia/Martin-Zurro.pdf>

Martin Zurro A, Cano Pérez JF. Compendio de Atención Primaria: Conceptos, organización y práctica clínica. 3rd ed. Barcelona: Elsevier S; 2008. eBook ISBN: 9788480865142.

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http://ddd.uab.cat/pub/guibib/60727/modelvancouver_a2010-2.pdf

http://www.nlm.nih.gov/bsd/uniform_requirements.html

GUIA DE BONES PRACTICA EN RECERCA

IDIAP

http://www.idiapigol.org/images/stories/Difusio/Publicacions_IDIAP/guia_bones_practiques_2010.pdf

REFORMA DE L'ATENCIÓ PRIMARIA A ESPANYA

<http://www.gacetasanitaria.org/index.php?p=watermark&idApp=WGSE&piiltem=S0213911111002470&origen=g>

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