

# LIC Timetables

## *Organised Chaos*

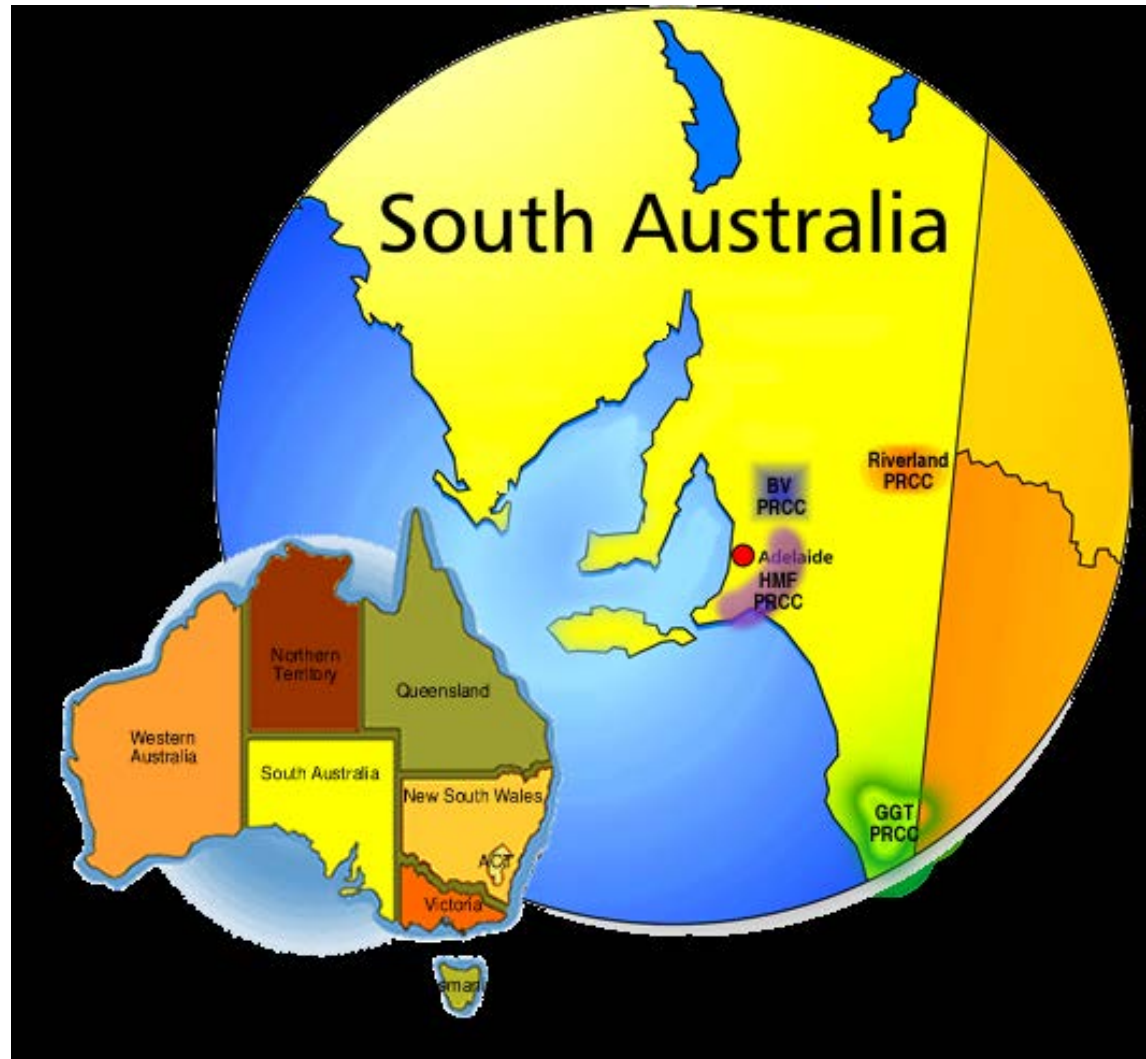
Emma Mackenzie  
LIFT Pilot Administrator



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inspiring achievement

# Background



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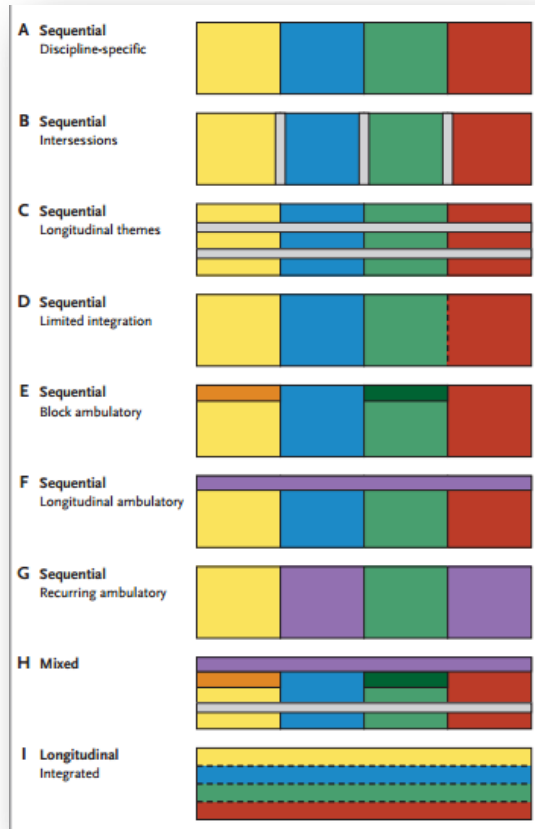


8 x Students  
5 x General Practices  
3 x Hospitals  
35 x Visiting Specialists

# Background

	Monday	Tuesday	Wednesday	Thursday	Friday	Sat Sun
AM	Parallel Consulting	Teaching Day	Specialist Theatre Session	White Space (at clinic)	White Space (at clinic)	On call
PM	White Space (at clinic)	Teaching Day	White Space (at clinic)	Parallel Consulting Session	Specialist Consulting Session	
AH			On-call			

# Longitudinal Integrated Flinders Training - LIFT



Source: Hirsh D, Ogur B, Thibault G, Cox M. "Continuity" as an Organizing Principle for Clinical Educational Reform. *New England Journal of Medicine* 2007;356: 858-866

# Questions:

1. What strategies do LICs have in place to manage and organise these seemingly chaotic “integrated” timetables?
2. At what point does student-led become student managed? How do we balance:
  - university managed timetables (sessions)
  - student initiated “ad-hoc” sessionswithout disrespecting clinicians, upsetting administrative staff and stifling student initiative? What is ok?



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