

There's a student coming next
week.....

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- Dread – or delight?
- Fun - or frustration?
- Collected wisdom – 100s GPs, 1000s Students
- Back to Basics!



Back to Basics

- Before they arrive
- When they arrive
- While they are here
- When they have gone



Before they arrive

- Things to think about
- Rooms
- Staff
- Activities
- Communication



Rooms

- Usually at a premium
- Is there anywhere they can use? Couch? Desk?
- Is there anywhere else you can go?
(admin etc)
- Is there a time they can use a room for a “student” surgery with staff around – e.g. lunchtime.



Staff

- What staff do you have at the practice?
- What NHS staff are available locally that you might tap into?
- What other staff resources might be available e.g. pharmacists, funeral directors, listening services, care home staff, patient groups?



Activities

- What is going on in the surgery?
- Do you need to think about adapting what is going on in the surgery e.g. appointment times, visit routines, rotas?
- What might be going on within the team e.g. with community nurses, palliative care staff, community hospital, OOH, midwives.



Activities

What might be going on elsewhere?

Cardiac rehab

Patient self help groups

Family planning clinics

Physios

Chiropody

Pharmacists.



- Is there as system for finding out what might be going on elsewhere?
- Is there a written protocol to help prepare for the arrival of a student?
- Who is responsible for coordinating with community staff?
- Who is responsible for creating a timetable?
- Is the student timetable– compatible with the a)availability of others and b)periods of useful activity?



Communication

Communication within the practice –

- does everyone know they are coming?
- what year they are in, which university?
- What their name is?
- Is there a means of alerting the patients to their presence (and permitting them to decline to have them there) before they go into the consulting room?



Communication outside the practice

- Are you aware of the desired outcomes of the attachment in the university curriculum?
- Do you know what the student should be capable of doing? What skills they already have?
- Are there any forms to fill in for the University or does the student need any skills etc signing off?
- Do you know who to contact in the event that the student doesn't turn up or if there is a problem?



Communication with the student

- Do you have a means of communicating with the student before they arrive?
- Do you have a student pack?
- Is there information it might be useful for them to know before they come?
- Do you direct them to the surgery website before they come?
- Do they have a named contact to ask for on arrival and a number to ring in case they run into problems on the way?



On arrival

- Student's biggest gripe
- “ They didn't seem to know I was coming”
- “ There was nothing arranged”



On the other hand.....

- “They were very friendly and welcoming”
- “They put me at my ease.”
- “ They asked what I would like to get out of the attachment and if there was anything particular that I would like to see”



Think Clinical Communication Skills

- Greet (and check identity of student)
- Establish rapport
- Assess starting point (but don't always believe what you hear!)
- Explanation of how the placement will work
- Signposting
- Chunk and check
- Questions
- Safety net



Arrival

- Ring fence time for greeting (practice manager/ named partner?)
- Student pack - (see next slide)
- Timetable – (but keep flexible)
- Confidentiality agreement
- Staff introductions
- Toilets, coffee, lunch etc
- Set aside time for basic software session
- Buses, accommodation, ferries, etc



Student pack

- Welcome letter – Dear John/Abdul/Mary
- Practice leaflet
- Names and roles of all practice staff /photos
- Confidentiality agreement – spelled out.
- Any house rules e.g. dress code, smoking in car park, use of smart phones any common fund for coffee etc
- Idiots guide to EMIS/GPASS or whatever



Student pack 2

- Log in details
- BNF (or link to e version)
- FAQs – what to do if/how do I/ who do I?
- Timetable
- Details of practice contact if e.g. off sick / get a puncture etc.

Student pack - possibilities

- If staying locally – places of interest/staff star ratings for local eateries/ things to do etc
- Examples of commonly used forms e.g. fit note, death certificate, prescription, referral template (depending on year of study)
- Examples of results proforma etc

Student box

- Inventory (things walk! – check with student at beginning and end of placement)
- Auroscope/ophthalmoscope
- Stethoscope
- Peak flow meter and mouthpieces
- Sphyg
- Patella hammer
- Pen torch
- Box of disposable tournaquets
- Etc, etc.



While they are here

- Biggest gripe –
- “ I just sat there and observed”
- “ I wasn’t able to do anything”
- “ All I did was sit in surgeries”



On the Other hand.....

- “ I even got to take a patient’s BP!”
- “ I got plenty of practice at taking blood”
- “ I really enjoyed going to patient’s homes”
- “ I heard my first murmur”
- “ I got to hold a baby !!!”
- “ He let me do the flu jabs”

- We tend to forget, there is a first time for everything.....



Rabbits in the headlights




Assess their ability/lack of ability

- All students are different
- Some are outgoing/competent
- Some are shy/less competent
- Some are a mixture



ABJIA



COULD BE
ANYTHING.

WAY TOO GENERAL PRACTITIONER

Initial sessions

- ? Change consulting rate – 1.5 x 2 times the norm.
- Allow students to observe – ask them to comment after the consultation
- Allow students to demonstrate their skills under supervision



Later sessions

- When you have some confidence in their ability :-
- Ask student to see the patient first while you see another patient/s
- Book patients to “student” surgeries for follow ups at a time when you are around.
- Ask them to do a visit and then join them half an hour later .



Later sessions - suggestions

- Ask them to record an entry in the notes – signing it with their name and designation (e.g. 4th year medical student)
- Ask them to prepare the prescription they feel might be appropriate – for you to consider and discuss/sign/destroy.
- Ask them to go through results and highlight abnormalities with suggestions of any actions which might be required for you to go over and check with them.



More suggestions

- Ask them to do a “ward round” of patients at the community hospital and then present to you at a later time.
- Ask them to see your patients at a residential home and ask them to present to you at a later time.



When in surgery

- Get into the habit of “messaging” each other if there is something interesting e.g. rashes, murmurs, pleural rubs, clinical signs of any description.
- If patients need investigations – e.g. ECG, Lung function tests, blood tests, ABPI etc – ask the student to do it rather than making a nurse appointment (rooms allowing)



When in surgery

- Ask the student to make a list of at least five things each day they haven't come across before – e.g. new drugs, new presentations, diseases etc. Ask the to write a paragraph on each to discuss the following day.



Brownie Points

- Set aside ring fenced time to discuss what you have seen during the week.
- Buy lunch for your student once during their attachment (you would be surprised how excited they get by this!)
- Treat them as colleagues - involve them in the normal activities of the practice

Opportunities

- Ask about career intentions and reasons
- Good experiences change career intentions!!
- Take the opportunity to demonstrate the positive elements of the career and accompanying lifestyle
- Put the negative elements in context



Opportunities

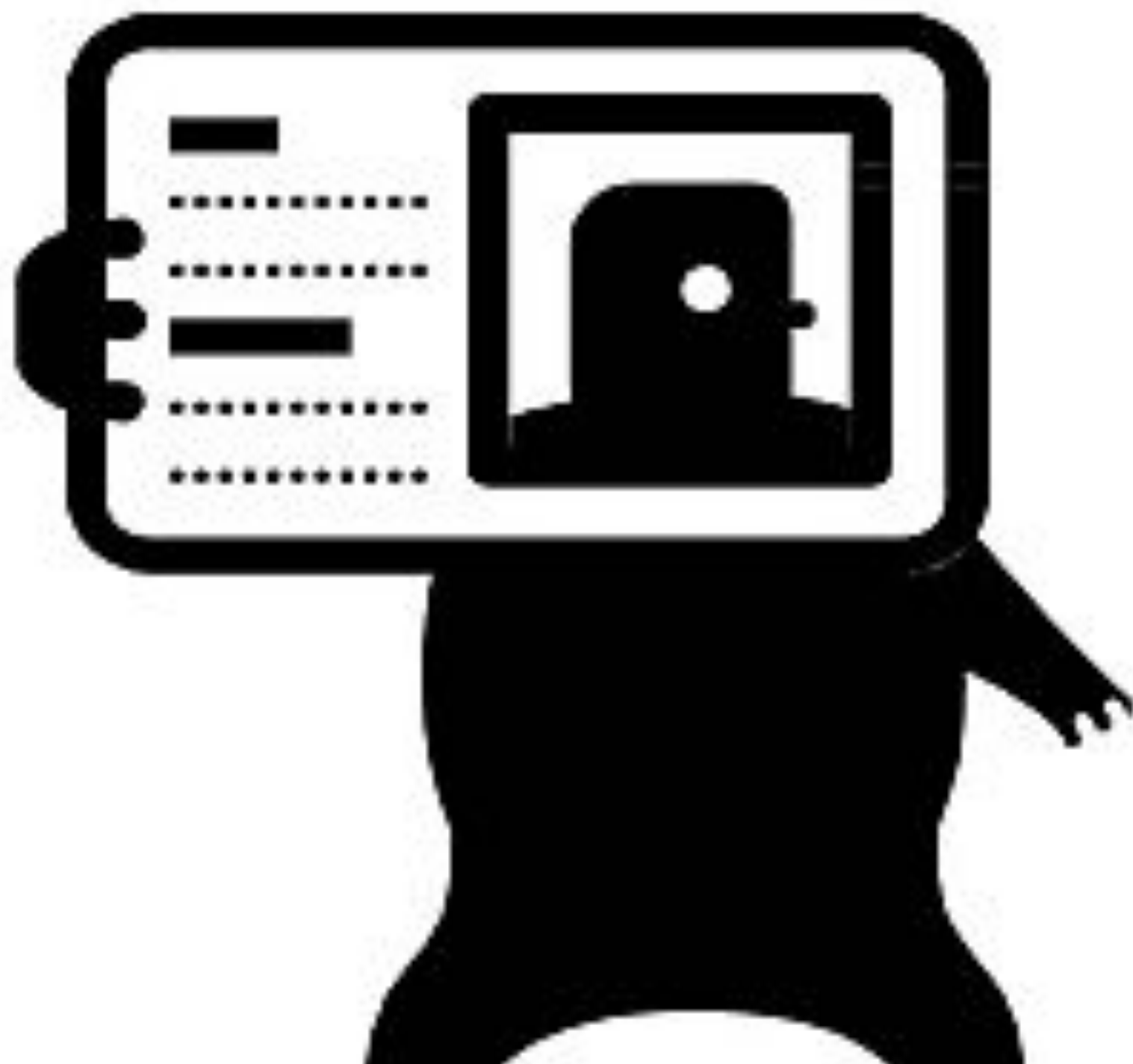
- CHERISH the good students
- (these could make the GPs of OUR old age!!)



End of Attachment

- Ring fence time to reflect on the attachment with the student.
- Take their photo (see later)
- Collect “appraisal” of students from all members of practice staff – anonymously but preferably in writing.
- Feedback the collated information to student and ask for their thoughts on the feedback.





After they have gone

- Photo – rogues gallery
- Students ask for references – helps to put a face to the name
- Keep copies of the comments from the staff and any reports, summary of discussion etc in a secure file with photo of the student, and dates of attachment in case of any appeal or difficulties down the line

After they have gone

- ? Keep in touch (with some of them anyway!!)
- ? Nurture the good ones and give guidance as required towards a career in General Practice.



MEDICAL STUDENT



What my friends think I do.



What my family thinks I do



What society thinks I do.



What I wish I did



What I think I do.



What I actually do.

- Questions?

