Developing Work Experience Placements for Schools

Will McConnell
Work experience

• Keen to encourage students from a wide range of backgrounds to consider a medical career
• Frustrations from consultant colleagues esp in ED and surgery
• Urban myths over “what is allowed”
• Only served one school in Dorset
• Arbitrary decisions about suitability of students for placements
• Little effort put into finding placements
• Limited pool of consultants (and others) used
Make a Policy
Work experience Policy

• clarifies what they can expect
• defines the systems to ensure that the placements are fair, worthwhile and safe
• identifies the differing requirements of work experience attachments
• identifies opportunities for different ages
• defines which students will be given higher priority
• explains the responsibilities of work experience students
• explains the responsibilities that our staff to reduce risks to staff, to patients and to the students
• clarifies the responsibilities of DCHFT and provides assurance to the Trust that risks and costs associated with work experience are assessed and managed
Roles to support Work Experience

- Placements Administrator
- Head of Education
- DME/ADE
- Work Experience Lead (consultant or senior clinician or senior manager)
- Supervisor
Age restrictions

• Pre GCSE (ie aged 14/15)
  – NOT visit O&G, paeds, ED and theatre
  – Talk to patients (with consent)
  – Run errands (eg visit shop)
  – Read/write to patients
  – Assist with feeding under supervision
  – Make drinks and toast after training
  – Assist in transfers
  – General duties
  – Tidying up
  – Practice with observations
  – Clerical duties with training

• Post GCSE (ie aged 16-18)
  – NOT visit O&G or paeds
  – CAN visit ED and theatres
  – Can observe:
    • Dressings
    • Minor or major surgery
    • Investigations and procedures
Process

• Create policy
• Get a new Placements administrator
• Identify work experience placement leads
• Leads to complete Placements timetables, risk assessment and learning objectives
• Application forms signed by student, parent and school
• Induction checklist
• Feedback
Appendix 2

Risk Assessment Form for Work Experience placements

This form must be completed and forwarded to the Placements Administrator at the Education Centre DCHFT. This Assessment applies to a particular work experience post and must be regularly reviewed and updated as required. For each postholder of this placement, you must discuss these risks, prior to their starting the placement.

Name of Work Experience Lead completing the risk assessment and responsible for the placement and the postholder

Date

Are there any of the following hazards present in the workplace? If so, what measures are in place to prevent the person being exposed to these hazards?

<table>
<thead>
<tr>
<th>Hazard</th>
<th>Yes/No</th>
<th>Details and precautions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Verbal abuse/aggression</td>
<td></td>
<td></td>
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<tr>
<td>Manual handling</td>
<td></td>
<td></td>
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<tr>
<td>Extreme temperatures</td>
<td></td>
<td></td>
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<tr>
<td>Noise or vibration</td>
<td></td>
<td></td>
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<tr>
<td>Ionising radiation</td>
<td></td>
<td></td>
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<tr>
<td>Biological agents</td>
<td></td>
<td></td>
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<tr>
<td>Hazardous substances</td>
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<td></td>
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<tr>
<td>High voltage electricity</td>
<td></td>
<td></td>
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<tr>
<td>Machinery</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Are there confidentiality and consent issues to be considered? How are these to be managed?

Could any task be reasonably considered to be beyond a young person's physical or psychological capacity?

Are there any risks in the workplace which could pose a threat to an individual's health and safety due to lack of awareness or their immaturity?

Guidance for Work Experience Leads

The risk assessment form should be reviewed each time a new work experience placement is arranged. In most cases a previous risk assessment can be copied. However, changes in the work place must be considered along with the age and capabilities of the individual.

Completing the Risk Assessment

- The risk assessment should be completed as fully as possible for the area the individual will be working by the person supervising or their line manager.
- It should be taken into account that volunteers or placement workers are likely to be inexperienced, unaware of health and safety risks and in the case of work experience students, may be physically or mentally immature.
- You should put in place measures to control the risks which will remove them altogether or reduce them to the lowest possible level.
- Work experience students should not undertake any moving and handling tasks unless they have undertaken formal course of training.

The Completed Risk Assessment

- A copy of the risk assessment should be kept by the Work Experience Lead.
- A copy of the completed risk assessment should be sent to the Placements Officer.
- The risk assessments may be reviewed by the Placements service.

Precautions that must be taken

- All members of staff the individuals will be working with should receive a brief on the limitations of each work experience placement.
- The individual should receive an induction to the Trust and area of work on the first day of the placement from the Work Experience Lead, including a discussion of the potential risks.
Induction checklist for Work Experience Students

The Work Experience Lead should ensure a local induction is provided on the individual's first day.

Name of student: .........................................................

Dates of Placement: From ...................................... To ........................................

Emergency Contact Details

Name: ..................................................... Telephone/Mobile Number: ........................................

Address: ........................................................................................................................................

<table>
<thead>
<tr>
<th>Issue</th>
<th>Covered?</th>
</tr>
</thead>
<tbody>
<tr>
<td>ID Badge</td>
<td></td>
</tr>
<tr>
<td>Statement of Agreement signed</td>
<td></td>
</tr>
<tr>
<td>Confidentiality and personal boundaries</td>
<td></td>
</tr>
<tr>
<td>Restrictions on work</td>
<td></td>
</tr>
<tr>
<td>Patient consent</td>
<td></td>
</tr>
<tr>
<td>Hours of work and timetable</td>
<td></td>
</tr>
<tr>
<td>Breaks and toilets</td>
<td></td>
</tr>
<tr>
<td>Dress code</td>
<td></td>
</tr>
<tr>
<td>Fire procedures</td>
<td></td>
</tr>
<tr>
<td>Security</td>
<td></td>
</tr>
<tr>
<td>Health and Safety and risk assessment</td>
<td></td>
</tr>
<tr>
<td>Who to contact if sick</td>
<td></td>
</tr>
<tr>
<td>What to do if upset or unwell</td>
<td></td>
</tr>
<tr>
<td>Reporting accidents</td>
<td></td>
</tr>
<tr>
<td>Tour and introductions</td>
<td></td>
</tr>
</tbody>
</table>

Student signature: ..............................................................................................

Work Experience Lead signature: ............................................................................
Challenges

• **Consent**
  – Must get permission from each patient in advance of seeing a work experience student or discussing patients in the presence of a work experience student
  – Getting permission in ED is difficult since things happen so quickly
  – Patients lacking capacity, eg many elderly patients, cannot give consent to be seen by a work experience student
  – THESE ISSUES ALL APPLY TO MEDICAL STUDENTS – MAYBE THEY SHOULD NEVER SEE A PATIENT WHO LACKS CAPACITY

• **Confidentiality**
  – We cannot hold students under the age of 16 responsible for breaches of confidentiality
  – Dorset is small – students may well see people or relatives of their friends
  – BUT SCHOOLS CAN HOLD THEM TO ACCOUNT

• **Apparently under 18s cannot go into theatre because:**
  – Consent – the patients will be under GA so do not know realise what the student will see
  – Confidentiality - we cannot control what the students say outside the hospital and cannot punish them
  – Disturbing for the student
  – If the student faints, the nurses will have to look after them

• **Nurses vs Doctors**
  – Risk aversion amongst nurses
  – Longer term view from doctors
<table>
<thead>
<tr>
<th>Date</th>
<th>Number and Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sep-13</td>
<td>2 Renal</td>
</tr>
<tr>
<td>Oct-13</td>
<td>1 Radiography</td>
</tr>
<tr>
<td>Nov-13</td>
<td>1x Radiography, 1 Elderly Care</td>
</tr>
<tr>
<td>Dec-13</td>
<td>1x Cardiology</td>
</tr>
<tr>
<td>Jan-14</td>
<td>7 = 1 Cardio, 1 Endocrine, 1 Elderly Care, 1 Dietetics, 3 Physio</td>
</tr>
<tr>
<td>Feb-14</td>
<td>3 Physio, 1 orthodontics, 1 dietetics, 1 Surgery, 1 Endocrine</td>
</tr>
<tr>
<td>Mar-14</td>
<td>1 Physio</td>
</tr>
<tr>
<td>Apr-14</td>
<td>3 Medicine, 1 Surgery</td>
</tr>
<tr>
<td>Jun-14</td>
<td>3 Medicine</td>
</tr>
<tr>
<td>Jul-14</td>
<td>7 = 1 radiology, 5 medicine, 1 Speech Therapy</td>
</tr>
<tr>
<td>Aug-14</td>
<td>0 = Summer Holidays</td>
</tr>
<tr>
<td>Sep-14</td>
<td>4 = 1 Project Management, 1 Urology, 1 Cardiology, 1 speech and language</td>
</tr>
<tr>
<td>Oct-14</td>
<td>7 = 1 Maxillofacial, 2 Cardiology, 1 renal, 1 A&amp;E, 1 Radiology, 1 Oncology</td>
</tr>
<tr>
<td>Nov-14</td>
<td>6 = 1 Speech and Language, 1 Surgery, 3 Physiotherapy, 1 Medical Physics</td>
</tr>
<tr>
<td>Dec-14</td>
<td>1= nursing</td>
</tr>
<tr>
<td>Jan-15</td>
<td></td>
</tr>
<tr>
<td>Feb-15</td>
<td>1 = Ophthalmology</td>
</tr>
</tbody>
</table>
Introduction to Medicine Course

• 2-day course aimed at 6th formers
• Choose most engaging consultants
• What is a doctor?
• What Specialties
• Meeting medical students and junior doctors
• What is the structure of training
• How to choose medical schools
• What medical schools expect of you
• Experience in Acute situation – simulation
• Experience of patient with chronic disease
• Very good feedback – mainly wanted a 3rd day with a hospital tour
• F1 mentorship
Feedback from Students...

Feedback form for Work Experience Students

Dorset County Hospital NHS Foundation Trust

16 JUL 2014

Name:

Supervisor: Dr. Tadros
Department: Ophthalmology

Dates of attachment: 10th July

1. What did you hope to learn from your placement?
   Different clinical conditions & treatments involving the eye.
   Anatomy of the eye and have seen different parts work.

2. Has this been achieved?
   Yes / No

3. Do you feel your placement has given you a better understanding of the work that is undertaken in a hospital?
   Yes / No
   If no please give details:

4. Do you feel the structure of the programme was:
   Satisfactory / Unsatisfactory

5. Did you feel adequately supported during the attachment?
   Yes

6. Do you feel the length of each session was:
   a) Satisfactory b) Too long c) Too short

7. Which sessions did you find most interesting?
   Shadowing Dr. Tadros' clinic in Sheborne

8. What additional sessions, or visits to other departments, which you feel should be included in the programme?
   

9. Do you feel it would have been useful to have been provided with any more information before your placement?
   Yes / No
   If yes, please give details:

10. How has your placement influenced your choice of career in any way?
    It was very interesting and helpful to talk to Dr. Tadros about his career in medicine and I now feel more prepared for my application.

11. Please add any other comments you feel would be helpful:
    Dr. Tadros is a great teacher, he is very passionate about his specialty and that comes across. I enjoyed my day with him and found it very rewarding.

Thank you for your help in completing this questionnaire. Please return to:

Judy Crabb
Medical Education Manager
Education Centre
Dorset County Hospital
Williams Avenue
Dorchester DT1 2JY
Feedback from Schools....

• The work experience opportunities you provide for our student are invaluable. When I am not organising Work Experience, I support students with their Personal Statements for university applications and the paragraphs they include about their work experience with you are the key element which will get them a place ... or not if they have not done any! While this is obviously true and necessary for medical applications, you have helped us with providing work experience in your finance department and more ‘periphery’ areas such as the pharmacy. The quality of the work experience has been very good and often excellent with the students given a planned and effective timetable.

• The Mentor opportunity is clearly an excellent idea and while I have no evidence as yet, the students are keen and feel supported. Introduction to Medicine was clearly very helpful – and I learnt a great deal on the afternoon I came about how to advise students too. Many mention the course in the Personal Statements and you have given them quite simply more to talk about, more to say in terms of observation and their learning.

• The way the application system is organised works very well and Mikayla is excellent in her efficiency in responding to both the students and me.

• DCH is our key most reliable provider of excellent work experience and we would simply be stuck without you.
Work experience - Negative Aspects

- Persistence is required – no one’s priority
- Barriers from some nurses
- Bureaucracy – inevitable
- Some colleagues still doing their own thing
- Lack of central guidance – lots of urban myths
- No money
Work experience - Positive Aspects

- Enthusiasm from Medical colleagues
- Enthusiasm from Schools – esp certain schools
- Enthusiasm from Students
- Enthusiasm from Senior Management
- Excellent enthusiastic Placements administrator
- Contributing to the community
- Reinventing something old
- Thanks to Judy Crabb and Mikayla Lewis