

## Medical Students PHC Remote Guideline

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Jurisdiction	Primary Health Care Remote CAHS; Primary Health Care Remote TEHS
Jurisdiction Exclusions	N/A
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### Purpose

To provide Primary Health Care (PHC) remote staff with a guideline to support medical student placements in remote health centres.

### Guideline

## 1. General Information

Medical students are encouraged and supported to undertake placements in Department of Health (DoH) remote health centres across the Northern Territory (NT) as part of a long-term strategy to develop a qualified rural medical workforce in the NT.

The Primary Health Care (PHC) Director of Medical Services (DMS) in Top End and Central Australia are responsible for accepting medical students for placements in PHC Remote. Placements are brokered through [Flinders University](#), Flinders NT and John Flynn scholarship students through the Northern Territory General Practice Education ([NTGPE](#)). The PHC DMS are then responsible for confirming the location of the placement and liaising with the Supervising Medical Officer ([SMO](#)) or Primary Health Care Manager (PHCM) to oversee each student placement. The SMO / PHCM, in partnership with the PHC team, provide the support for a beneficial, enjoyable, safe, educational and cultural experience for the student, while ensuring the safety of the clients attending the health centre. The remote context and the people living in the communities create a distinctive setting for this experience to occur.

## 2. Procedure

### 2.1 Arrangement of Student Placements

Placement of medical students in DoH remote health centres\* is initiated by [Flinders NT](#) / [NTGPE](#) who must approach the Top End or Central Australian PHC DMS in the first instance. Students **must not** initiate this process and all student enquiries must be directed back to Flinders NT / NTGPE. If a health centre or community is contacted directly by a medical student to initiate placement, the student must be referred to the PHC DMS.

In general students placed through Flinders NT will be required to have minimum placement of six weeks.

The PHC DMS will negotiate the preferred location with the relevant personnel, eg PHCM, District Manager and SMO. Once a placement is negotiated, Flinders University / NTGPE must provide written details regarding the student to the PHC DMS.

Other DoH staff are not permitted to accept medical students placements and all enquiries received should be directed to the relevant PHC DMS.

*\* Note: Where a GP who is not employed by DoH works in a DoH health centre, this GP should also accept the placement. Although the GP in this instance becomes the SMO, other aspects of placement governance described in this document remain relevant.*

## 2.2 Medical Student Requirements

### 2.2.1 Flinders NT / Northern Territory General Practice Education (NTGPE)

The following are requirements to be attended by Flinders NT or NTGPE prior to a medical student commencing placement in Departmental health centres:

- Liaise with the PHC DMS to arrange the medical student placement
- Provide confirmation in writing to the PHC DMS before the placement commences, that includes:
  - commencement and completion dates of the placement
  - year of medical training
  - placement type that is required – clinical, non-clinical or clinical/non-clinical
  - student learning objectives, assessment documentation and expectation of supervisors / Departmental staff
  - notice that the medical student has a current [Working With Children Clearance](#) (WWCC) and [Criminal History Check](#) (CHC)
  - notice that the medical student has an Aboriginal Land Permit
  - immunisation status as per Staff Immunisation recommendations
  - current CPR competency / First Aid certificate
  - current hand hygiene certificate
- Students are registered with the Medical Board of Australia as as required under the [Health Practitioner Regulation National Law Act](#) Division 7 Student Registration. The relevant University is responsible for completing this requirement following student enrollment. However no registration number or certificate is provided by AHPRA to the student. If required, the student's education provider can provide proof of enrolment.
- Provide cultural awareness orientation before the placement commences
- Provide an orientation and information package that includes information about the suite of Primary Health Care Manuals (including the web address), information about the local community, etc
- Require students to display their university medical student identification badge while on placement
- Provide posters to the health centre (see [4.4](#))
- Submit the student's Application for EHR Access ([PCIS](#) / [EACS](#)) to the PHC DMS for endorsement
- Liaise with students who may not be performing to the expected level, providing remedial intervention and other education management consistent with the identified level of concern that may be reported by the PHC DMS

### 2.2.2 Primary Health Care Director of Medical Services: Top End and Central Australia

The Department has a duty of care to take all reasonable steps to protect clients and staff from harm and to ensure that services are provided in a professional manner. In meeting this duty of care, the following are required prior to a medical student commencing placement in Departmental health centres and must be verified by the PHC DMS:

- Authorise the student's Application for EHR Access ([PCIS](#) / [EACS](#)) and forward the application to the relevant Helpdesk
- Initiate ePASS registration or delegate this responsibility appropriately
- Provide advice to internal and external parties, including education providers, as required
- Ensure medical students provide evidence of a current WWCC as required under the [Care and Protection of Children Act](#) and CHC as required by the DoH prior to commencing their placement
- Accept and oversee the safe and appropriate placement of medical students at DoH remote health centres with due regard to cultural, environmental and workplace health and safety
- Determine the placement type required
- Delegate responsibility of supervision to a SMO / PHCM for the duration of the placement
- Ensure that SMO / PHCM is fully briefed on their role and of the learning objectives of the student
- Ensure logistical arrangements are negotiated with the PHCM prior to the placement, including availability of accommodation if NT Health accommodation is required
- Liaise with Flinders NT / NTGPE regarding students who may not be performing to the expected level or should a disciplinary or adverse event occur during a placement

## 2.3 Supervision and Placement Activities

### 2.3.1 Supervising Medical Officer (SMO) - Top End / Primary Health Care Manager (PHCM) - Central Australia

The medical student is under the supervision of a SMO / PHCM who has been delegated by the PHC DMS, for the duration of the placement. The SMO may be resident or visiting, have full and unrestricted registration by AHPRA and no prior history of removal from the register for disciplinary reasons under any jurisdiction and should demonstrate a commitment to ongoing professional development. The following requirements should be facilitated by the SMO / PHCM:

- Placement activities to be developed in collaboration between the SMO / PHCM and the student to ensure the placement experience is able to meet the learning objectives
- Assist with orientation of students and promote integration within the health centre and community, including key safety and work practice policies and guidelines; and the location of educational resources, including reference materials.
- Provide on-site direct supervision of all clinical work, or delegate supervision to another registered health professional with appropriate supervisory skills, for tasks that are within the delegate's scope of practice. The SMO / PHCM remains responsible for ensuring supervision is maintained at a suitable level. The student can only undertake clinical care under the direct supervision of a registered health professional.
- Endorse the student's health record documentation for personally supervised cases
- Provide support and advice to students to further their learning and interest in remote indigenous health
- Liaise with the PHC DMS should a disciplinary or adverse event occur during the placement
- Provide feedback on student performance and complete assessment forms to the PHC DMS / Delegate as required
- **SMO Only:** Inform the PHCM in advance, of any occasions that they will be unable to provide direct clinical supervision

If a student is wishing to undertake any activities that constitute research, appropriate authorisation from community, Human Research Ethics and PHC must be obtained. See [Research Proposals](#) for further information.

### Delegated Supervisor

The SMO / PHCM may delegate supervision to another registered health professional, in order to undertake specific learning activities. The Delegated Supervisor may provide on-site direct supervision of

all clinical tasks, where delegated by the SMO / PHCM, according to the health professionals scope of practice. The SMO / PHCM remains responsible for ensuring supervision is maintained at a suitable level. Feedback is to be provided by the Delegated Supervisor on a weekly basis to the SMO / PHCM on the student's progress and overall performance. The SMO / PHCM must be informed immediately of any concerns or adverse events that occur while under their supervision.

Telephone supervision is **not** acceptable for any clinical care undertaken by the student.

All health centre staff may contribute to the learning process, including orientation, cross-cultural learning and mentoring of students to the health centre and the community.

### 2.3.2 Medical Student

During placement in Departmental health centres, the medical student is required to:

- Wear an identification badge at all times when on DoH premises
- Undertake clinical care under direct supervision of the SMO / PHCM or the delegated supervisor
- Ensure clients are aware of the student's medical student status and consent of the client before undertaking any care or consultation is obtained.
- Explicit verbal consent is required for procedures such as taking blood, suturing or giving injections and written consent for any procedure that would usually require written documentation. The consent must indicate the nature of the consent and must be recorded in the client's EHR.
- Ensure all consultations are documented in the client record and the documentation is endorsed by the SMO / PHCM or delegated supervisor
- Maintain the confidentiality of client information at all times. Students must also treat with confidence and respect any information learned of any person or staff member associated with PHC. Medical students are not to be involved in any portion of the medical care of other medical students.
- Follow the direction of the PHCM in regard to all other aspects of health centre operations
- Respect local community protocols and expectations, in particular in regard to alcohol restrictions for the community
- Behave in a manner in keeping with the [Code of Conduct](#) established by the [Public Sector Employment and Management Act](#)
- Students must not drive government vehicles
- Abide by the provisions of the Flinders University Placement Agreement / NTGPE Student Placement Agreement

## 2.4 Electronic Health Records (EHR) – Medical Student Access and Endorsement

Medical students are encouraged to contribute to official health records as this is viewed as an integral part of the placement and learning experience.

### 2.4.1 Access

Medical students must apply for a personal user account to access [PCIS](#) or [EACS](#), (depending on the placement location). This must preferably be done in advance of the placement, so that relevant EHR training can be arranged to ensure competent and confident use of the system by the student. See [Electronic Health Records Overview](#) for details.

Students who gain authorised [EHR User Access](#) will be assigned a unique User Id and Password for their personal use **only**. These details must never be disclosed to others. All information entered under this electronic signature is legally attributable to the User.

**Note: Staff MUST NOT divulge their own PCIS User Ids to the student.**

### 2.4.2 Endorsement of Health Record Documentation

While medical students may take histories from clients and perform examinations, all such activities must be validated and cross-checked by the usual history taking, examination and clinical assessment that would usually be performed by the supervising clinician. Similarly, if the student goes on home visits this should only be with the supervising clinician. The student may elicit histories and examine clients in their homes only under direct supervision.

After students have completed their consultation and documentation, the SMO / PHCM / delegated supervisor must provide additional notes and endorse the student’s entry as part of the same consultation. This may be done by utilising the comments field on the Waitlist feature (PCIS) / Service Recording Message (EACS) to inform the SMO / PHCM / delegated supervisor that the initial consultation is complete. The User Reference Guide (URG) Recording Student Consultations provides details on this process.

Student activities on EHRs are routinely audited to ensure appropriate endorsement occurs.

### 2.5 Medical Student Participation in Health Centre Activities

Posters that inform clients of the presence and role of the medical student, and which also advise of the right of the client to decline contact with the medical student, are provided by Flinders NT / NTGPE. When a medical student is present at a health centre, the poster should be clearly displayed.

Individual consent must be obtained from each client for the student to be present during their consultation. It is preferable to obtain this consent prior to entering the consulting room, and is to be requested by the supervising clinician in a manner that does not place the client in a position of obligation.

### 2.6 Medicare Claiming

The services that medical students provide are not Medicare eligible.

### Complaints/ Grievances

Complaints or grievances in the first instance should be referred to the student’s Placement Supervisor or directed to PHC DMS

### Mandatory and Voluntary Notification Requirements

The [Health Practitioner Regulation \(National Uniform Legislation\) Act](#) requires the Medical Board of Australia to be advised of ‘notifiable conduct’ by a medical student. Supervisors may make a voluntary notification about a student to AHPRA. See [Health Practitioner Regulation National Law Act](#), Division 2 Mandatory Notifications and Division 3 Voluntary Notifications for further information.

### Compliance

Feedback on student performance and assessment forms will be completed and provided as required	PHC DMS / PHCM / Delegated Officer
Concerns or adverse events will be reported and followed up	PHC DMS / PHCM / Delegated Officer

### Document Quality Assurance

	Method	Responsibility
<b>Implementation</b>	Document will be accessible via the Policy Guidelines Centre and Remote Health Atlas	Health Policy Guidelines Program
<b>Review</b>	Document is to be reviewed within three years, or as changes in practice occur	Atlas Development Officer, Primary Health Care CAHS
<b>Evaluation</b>	Evaluation will be ongoing and informal, based on feedback.	Atlas Development Officer, Primary Health Care CAHS

### Key Associated Documents

<b>Forms</b>	<a href="#">EACS User Access and WebClient Application Form</a> <a href="#">PCIS User Access and WebClient Application Form</a>
<b>Key Legislation, By-Laws, Standards, Delegations, Aligned &amp; Supporting Documents</b>	<a href="#">Health Records Documentation PHC Remote Guideline</a> <a href="#">Electronic Health Records Overview PHC Remote Guideline</a> <a href="#">Electronic Health Record User Access PHC Remote Guideline</a> <a href="#">Research Proposals PHC Remote Guideline</a> <a href="#">Visitors Overview PHC Remote Guideline</a> <a href="#">Consent to Treatment Health Services Guideline</a> <a href="#">Medical Student Placement TEHS Policy</a> <a href="#">Australian Health Practitioner Regulation Agency</a> <a href="#">Fact Sheet for Students</a> <a href="#">Centre for Remote Health</a> <a href="#">Flinders University – Medical School</a> <a href="#">Flinders NT</a> <a href="#">Hand Hygiene Australia website</a> <a href="#">Northern Territory General Practice Education (NTGPE)</a> <a href="#">Health Practitioner Regulation National Law Act</a> <a href="#">Public Sector Employment and Management Act</a> Office of the Commissioner for Public Employment - <a href="#">Code of Conduct</a> <a href="#">Care and Protection of Children Act</a> <a href="#">East Arnhem Communicare System</a> (intranet) <a href="#">Primary Care Information System</a> (intranet) <a href="#">Department of Health Research Guidelines</a> <a href="#">Remote Health Recruitment</a> website: Community profiles - <i>click on the interactive map to access individual community profiles</i> Remote Ready, <i>a booklet on preparing for work in remote locations of the NT</i> <a href="#">Aboriginal Land Permit</a> to enter and remain on Aboriginal Land or Seas adjoining Aboriginal Land <a href="#">Criminal History Check</a> <a href="#">Working with Children's Check</a>

References	As Above
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### Definitions and Search Terms

Preferred Term	Description
<b>Clinical Care:</b>	An interaction between a health care professional and a client regarding their health care. This includes verbal and physical interactions to assess, educate and treat the client's condition.
<b>Delegated Supervisor:</b>	a registered health professional who the SMO / PHCM can delegate supervisory responsibilities for defined periods for clinical and non-clinical tasks that are within the health professional's scope of professional practice.
<b>Electronic Health Record (EHR):</b>	a systematic collection of electronic health information about individual clients. The EHR is the <b>primary</b> health record into which client personal and health data must be entered.
<b>Health Professional</b>	indicates a currently registered health professional such as a Registered Nurse, Midwife, Aboriginal and Torres Strait Islander Health Practitioner (ATSIHP) or Allied Health Worker.
<b>Placement type:</b>	<p>dependant on the medical student's learning objectives, the following placement types, or a combination of both, are available at DoH remote health centres:</p> <p><b>Clinical:</b> includes client consultation and provision of clinical care under direct supervision, or assisting other health professionals in providing program care, eg assisting a midwife conduct an antenatal clinic</p> <p><b>Non-clinical:</b> involves activities such as special projects and chart/research audits, and any activity that provides the student with the opportunity for cross-cultural awareness and community familiarisation such as community education programs.</p>
<b>Primary Health Care Manager (PHCM) – Central Australia:</b>	provides the function of the SMO and has overall responsibility for ensuring that appropriate levels of supervision occur at all times for the duration of the placement, and that the student's learning objectives are met. The PHCM does not have to be physically present while the student is undertaking clinical care, providing a delegated supervisor is present.
<b>Supervising Medical Officer (SMO) – Top End:</b>	is a medical officer who has overall responsibility for ensuring that appropriate levels of supervision occur at all times for the duration of the placement, and that the student's learning objectives are met. The SMO is usually the resident or visiting Rural Medical Practitioner for the health centre. The SMO does not have to be physically present while the student is undertaking clinical care, providing a delegated supervisor is present.