

STATEMENT OF EXPECTATION

Medical Student volunteers in the NHS

In the current public health crisis, medical students are keen to help their colleagues working in the NHS. The NHS is in the best position to decide what it needs locally and medical schools will do all they can to support this. The following Statement of Expectation, developed by the Medical Schools Council with input from Health Education England and the General Medical Council, contains guidelines for NHS Trusts, medical schools and medical students relating to medical student volunteering. In this document we refer to medical students in roles that utilise their knowledge and skills above and beyond those that may be offered by non-medical student volunteers. In the latter case medical students would be subject to the same procedures as standard volunteers.

Summary

1. Medical students' first responsibility is to their continuing education. They must not jeopardise their readiness to qualify in the future by taking on too many additional responsibilities.
2. Volunteer medical students must be placed in structured clinical roles, should be paid and receive written Terms and Conditions.
3. NHS employers should be supportive to student volunteers and must not permit them to undertake tasks beyond their competence.
4. NHS employers must ensure that volunteers have appropriate induction, training and supervision in their volunteer role, including training in the use of Personal Protective Equipment (PPE) where necessary.
5. Medical schools will endeavour to maintain lists of all students volunteering in the NHS and will develop support systems and networks for them.
6. Medical Schools should write to their students to explain that if they wish to take paid roles as volunteers they need
 - a) the endorsement of their medical school
 - b) to follow the guidance below
 - c) to keep in close contact with their medical school so that support can be provided
 - d) to ensure that they keep up to date with online learning requirements

Broad Principles

Indemnity/Insurance

- Students volunteering for/with NHS Trusts will be covered by Crown Indemnity. They must not work beyond their competence.

Who can volunteer?

- Volunteering is optional and will not negatively affect students who do not wish to take part.
- Student volunteers should be placed based on competencies – non-clinical years students should not be put in clinical environments.
- Students should be able to leave volunteering roles should they wish. If

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this is the case, they should provide a an agreed period of notice to allow Trusts to rearrange shifts.

Terminology

- There should be clear terminology that defines a medical student volunteer and differentiates them from other professionals such as HCAs or recently graduated doctors.

Status

- All student volunteers must first request permission and approval from their parent medical school. No Trust should accept a student volunteer who does not have evidence of approval.

Location

- In the first instance, students who wish to volunteer should be encouraged to assist one of their local medical school Trusts or GP practices as they may have more experience in these environments. Although it is STRONGLY PREFERRED that students volunteer close to their medical school (as this makes organisation and support much easier) students should also be able to volunteer at local trusts or GP practices near their non-term time address so long as approval is first granted by their parent medical school. In this situation we suggest that the student contacts the nearest medical school so they can, if possible, provide a level of support.

Hours

- Student volunteer hours should be restricted to a maximum per week and per day. Student volunteer night shifts should be avoided.
- Students should negotiate their hours of volunteering bearing in mind their principle responsibility towards their continuing education.
- National rules around rest periods and breaks should be made clear to volunteers.
- All volunteering roles should be time limited, with the length made clear in advance.

Induction and training

- Students must have an appropriate formal induction by the Trust and be informed about the person to whom they will be reporting and who is providing supervision. Details should be provided of how to contact these people.
- Medical schools should work with Trusts to help them provide training materials where possible.

Risk assessment

- Trusts should complete a general risk assessment that has been shared with schools in advance.
- As far as possible in a healthcare environment, students should not be put at clinical risk.
- Students should be provided, where appropriate to local policy, with PPE and full training in its use.
- A sample Risk Assessment document from the University of Cardiff is appended for information. Medical Schools are welcome to adjust it for their own local needs.

Student wellbeing

- Medical schools should keep lists of student volunteers and their locations.
- Students should be aware of key contacts who are responsible for their wellbeing – this includes within Trusts and medical schools.

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- Shifts must be recorded as with any trust employee and there should be clear instructions on arrangements for self-isolation/sickness absence.
- There should be a clear process for raising concerns, with identified key contacts.
- Students should be included in daily briefings where possible to ensure they feel a part of the team. Where possible, a separate briefing for volunteers should also be held.
- Where possible, students should not continuously change roles and departments. If this is required then they should be provided with adequate support such as setting up volunteers with 'buddies'.
- Medical students volunteering in the NHS should try to ensure that they have food and other domestic supplies at home and someone to talk to after their shift in the NHS.

Communication

- There must be a contact system between Trusts and medical schools to discuss student volunteers in their organisation.

Duties

- Students should never be asked to undertake any activity beyond their level of competence. This should be made clear to all volunteers and they should be able to seek senior guidance should anything be unclear.

Sources of support and advice

1. WHO advice Mental Health and Psychosocial Considerations During COVID-19 Outbreak 12th March 2020. This offers guidance for different population groups relating to their psychosocial needs. https://www.who.int/docs/default-source/coronaviruse/mental-health-considerations.pdf?sfvrsn=6d3578af_8
2. Sustaining Wellbeing – advice from the Intensive Care Society on managing the needs of staff at different phases <https://ics.ac.uk/>
3. BMA Wellbeing service – 0330 123 1245 – available 24/7 access to confidential counsellor/peer support for any doctor/medical student and available to their families <https://www.bma.org.uk/advice/work-life-support/your-wellbeing>
4. Useful article – How to stop the anxiety spiralling out of control <https://theconversation.com/coronavirus-how-to-stop-the-anxiety-spiralling-out-of-control-133166>
5. Coping with stress – WHO patient flyer https://www.who.int/docs/default-source/coronaviruse/coping-with-stress.pdf?sfvrsn=9845bc3a_2
6. Advice from MIND regarding personal wellbeing to deal with anxiety and isolation <https://www.mind.org.uk/information-support/coronavirus-and-your-wellbeing/#collapse5a4fb>

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