

Medical Directors (Cheshire and Merseyside)
Directors of Medical Education (Cheshire and Merseyside)
Learning and Development Leads (Cheshire and Merseyside)

**North West: Workforce
Directorate**

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By Email

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Dear Colleagues

**RE: University of Liverpool - School of Medicine Undergraduate Medical Education
Clinical Placement Requirements.**

Ensuring high quality clinical placements and supportive learning environments are crucial if the required standards and the delivery of effective undergraduate medical education are to be assured.

Liverpool Medical School has been considering the requirements and the arrangements in place to ensure the robustness of its undergraduate medical education provision and the quality of placement experience. While this initial analysis has identified areas of strength, given the opportunity that the appointment of a new Head of School of Medicine has offered, and linked with a project to review the current undergraduate medical curriculum, there is both a need and value in restating the expectations and responsibilities on placement providers in delivering the placement component of the curriculum.

Therefore, please find attached a document which sets out the requirements that placement providers need to have in place and can fully demonstrate as part of any quality assurance processes.

All the requirements specified are also included in the Learning Development Agreement which is issued by Health Education England (HEE). The Learning Development Agreement is a formal agreement between HEE and NHS organisations which directly underpin the allocation and payment of education investment (formerly SIFT). HEE must be assured that organisations are fulfilling the expected responsibilities in order to justify and safeguard this investment.

We would be grateful if you, working with your Director of Medical Education and other responsible officers for your organisation for undergraduate medical education, can review the requirements and ensure that the necessary steps are taken to ensure adherence. Should you need any clarification or believe that you are not able to meet any of the requirements, then please make direct contact with Professor John Earis (earis@liverpool.ac.uk) and we will be pleased to respond and to offer any support that might be helpful.

We look forward to working with you in ensuring the best education experience for our medical students, recognising that it is this experience which can be so influential in helping students in deciding where to practice and develop their future careers.

Yours sincerely,



Dr Mike Farrell

Head of Education Transformation – North,
Health Education England



Professor H R Scott MD FRCP PFHEA

Head of the School of Medicine
University of Liverpool

Notes for Liverpool University Clinical Placements

1. *Placements must provide students with training and supervised practical experience as appropriate to their stage of development and as required by the clinical skills curriculum.*

While in the presence of patients, there must be clear arrangements for clinical supervision at all times (as defined by University policy). Students must be aware of who is acting as their clinical supervisor for each episode of patient contact.

Each placement must provide each student with at least 2 sessions weekly of consultant supervised experiential learning directly mapped to placement learning outcomes. It is anticipated that such time will also be used to deliver clinical service e.g. clinic, theatre, acute patient admission. When listed as an experiential teaching session, such sessions must also specifically ensure student-consultant and student-patient clinical interaction and feedback that facilitates learning related to the learning outcomes, rather than passive observation on the part of the student.

Each placement must provide each student with at least 2 hours weekly of senior medical staff delivered small group student teaching specifically mapped to the learning outcomes of the placement. This is specific time for teaching that is separate from service delivery e.g. bedside or class-room teaching as compared with attendance on ward rounds. Bedside group sizes must not exceed 8. At least half of this teaching must be provided by consultants.

2. *Site and departmental induction must be provided to every specialty placement, in line with University requirements.*
3. *Under the direction of the Sub Dean, each placement must provide a weekly timetable to students. These timetables will detail formal teaching episodes and locations and experiential teaching opportunities and locations that complements existing University teaching to address learning outcomes for the specialty. Time tables should be communicated to students ahead of, or on arrival to the placement and thereafter not less than 2 weeks in advance of teaching episodes. Updates to timetables must be communicated clearly and in a timely fashion.*
4. *Students and staff must be aware of and apply University processes for the management of concerns about student progress, conduct, or wellbeing, including timely notification of the University in respect of any concern.*

Placements must provide students with access to pastoral support. Placement leads must ensure that TOI data provided by the University is used to support student doctors in difficulty in an appropriate and timely fashion.

5. *There should be a named consultant Educational Supervisor for each student, relevant to the specialty of the placement, who is selected for their role, trained in supervision and feedback, appraised for their role, aware of current UoL Curriculum Learning Outcomes and who has designated job-plan time to meet with the student as below.*

- a. *at the beginning of each placement to discuss learning outcomes, the teaching and experience available in the unit and how to access it and who to contact in the event of concern about educational support or patient safety*
 - b. *at the end of each placement to review overall progress and provide a supervisor's report*
 - c. *on a weekly basis with students to provide feedback on progress against learning outcomes*
6. *Placements must provide students with the opportunity to learn alongside, and from, other professions.*
7. *Clinical staff in placements must support the specialist lecture/teaching programme of the School and the development of future learning outcomes and assessments.*
8. *Clinical staff at an appropriate level of seniority (as approved by the University for each assessment) must be readily available and trained to support the observation and sign off student experiences, as recorded in the University portfolio, and the delivery of summative assessments, including OSCEs.*
9. *Each Trust Clinical Placement must ensure support of medical students through designating:*
 - *A minimum of 1PA for the Site Lead consultant (more time is needed for Trusts undertaking a large teaching programme).*
 - *0.5PA for consultants* undertaking a significant role in the core team (e.g. local year leads).*
 - *0.25 PA for Teaching Leads in specialty/directorate/units to manage the delivery of the local specialty based programmes for groups of students.*
 - *1 hour per week, per 2 students, during the time students are on the placement, for each Educational Supervisor. (A maximum of 5 students should be assigned per single supervisor.)*
10. *The Sub Dean should have other clinician support for his/her role depending on the number of students. The University Suggests:*
 - a. *A designated unit/specialty Teaching Lead consultant within each clinical unit/specialty that is receiving regular cohorts of students for clinical teaching. They will liaise with the Sub-Dean to manage the allocation of students and support accurate direction and updating of teaching timetables within the unit.*
 - b. *In sites taking >1000 student weeks, support of separate individuals such as local year leads is needed.*
11. *In addition to support for the core clinical teaching team there must be appropriate fixed time from the wider professional team to manage requirements for clinical skills/simulation, pharmacy and other appropriate areas of the curriculum. Time required depends on the programmes and should be agreed with the Site lead consultant* and University.*
12. *Clinical placements must be aware of the University policy on leave and attendance and liaise with the School to support accurate recording and regular reporting of leave and student attendance.*
13. *One FTE senior administrator/undergraduate manager to provide the overall co-ordination of the placement and liaison with the University. Additional administrative staff depending on the number of student weeks. There should also be support from the Trust's wider educational team.*

14. *Students and staff must be aware of and apply University processes for the management of concerns about patient safety.*
15. *Placements must provide students with the resources needed to progress in their placement e.g. internet, PC and clinical records access*
16. *Teaching Hospital Trusts and GP Placements must actively participate in the University Quality Assurance Programmes, provide requested information and host quality visits. The requirements and recommendations of these visits must be addressed with an action plan within three months of the report. Placements must support the data collection, review and actions needed relevant to the University evaluation of student placement experience.*