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To:

Acute trust medical directors and chief information officers

CC:

- Regional medical directors
- Regional postgraduate deans

07 January 2021

Dear colleagues,

We are writing to let you know that to support NHS staff to carry out their frontline duties effectively and safely, NHS organisations can choose to deploy medical students – those currently on clinical placements in acute trusts in your region – to do paid volunteer work caring for patients whilst on these placements. This approach has been tested in London and gained support from the regional postgraduate dean and the medical schools in London.

What this means in practice is that, in addition to the time spent in clinical placements, medical students can sign up for paid work up to 12 hours per week to support clinical services. This will need to be in agreement with the local medical school but is in line with the published volunteering guidance by the Medical Schools Council. Costs should be funded from existing COVID-related funding allocations, which include workforce pressures.

In addition, to enhance the support that they can give to the trust through the time they have in clinical placement by becoming more effective in clinical teams, they should be given personal access to local trust IT and electronic patient records systems. The need to be fully integrated into the clinical team is important so we are asking that you now facilitate medical student training through the e-Learning for Health information governance module to ensure that they are up to date with your local information governance requirements.

As you know, frontline NHS staff with direct patient contact are eligible, as a priority, to be administered the COVID-19 vaccination commencing with those most at risk of serious illness from COVID-19. This should also apply to medical students that are

on placement in your region. However, not being vaccinated should not preclude involvement in the clinical team given all frontline patient facing staff must be provided with the appropriate PPE (including fit testing as per local IPC guidance) for the clinical area in which they are working.

We hope that this integration into the clinical team will continue to provide learning opportunities for medical students that are on placement and they should be encouraged to continue to, where possible, fulfil the requirements of their clinical logbooks and required outcomes. This cannot be applied uniformly but it is important that medical students see this call to action as an additional learning experience as well as reflecting their support in our current response to COVID-19. We believe that this approach also provides the best opportunity to enable the final year medical students to gain the required hours of education to be able to qualify and work as doctors from August 2021.

Regional postgraduate deans will be made aware of these proposals and the Medical Schools Council and Health Education England are supportive of allowing NHS organisations to take this approach subject to local need.

We want to take this opportunity to thank you for the immense contribution that you continue to make.

Yours sincerely,

Professor Stephen Powis

National Medical Director

Professor Wendy Reid

Executive Director of Education and Quality,

National Medical Director

NHS England and NHS Improvement

Health Education England