


**TRUST POLICY FOR THE USE OF ADULT VOLUNTEER PATIENTS FOR PARTICIPATION IN EDUCATION AND EXAMINATIONS**

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<b>Version / Amendment History</b>	<b>Version</b>	<b>Date</b>	<b>Author</b>	<b>Reason</b>
	V1	February 2008	S. P Canaway	Original policy
	V2	February 2011	S. P Gilliam	Formatted to Trust Standard
	V2.1	October 2011	S. P Gilliam	Minor Amendments
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	V3.1	August 2017	Karen Swift	Review - No Change
	V4	July 2020	Karen Swift	Updated to include consent form and over-arching UHDB policy
	V4.1	October 2023	Emma Brown	Minor amendments
<b>Intended Recipients:</b> All staff groups.				
<b>Training and Dissemination:</b> Dissemination via the Trust Intranet				
<b>To be read in conjunction with:</b> Caldicott Recommendations, Data Protection and Confidentiality (Dealing with Confidential Information) - Trust Policy and Procedure, Information Governance – Trust Policy and Procedure, Records Management – Trust Policy and Procedure, Resuscitation – Trust Policy and Procedure, Risk Management - Strategy and Supporting Policy (Including the Assessment and Management of Risk) - UHDB Trust Policy and Procedure				
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<b>Review Date and Frequency</b>			October 2026 and then every 3 years	
<b>Contact for Review</b>			Undergraduate Operations Manager, Medical Education	
<b>Executive Lead Signature</b>			 Gisela Robinson, Interim Executive Medical Director	

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### **1. Introduction**

Volunteer patients are brought into the Trust to support and enhance the teaching experience for medical students whilst on clinical placement. Volunteers with specific clinical signs attend, this allows medical students to take histories and examine patients and identify their health condition in a safe learning environment. Volunteers are also able to role play scenarios to allow students to practise their communication skills, for example breaking bad news.

### **2. Aim**

The aim of this Policy is to:-

- Provide guidelines for staff who organise the use of volunteer patients
- Ensure uniformity throughout the Trust when dealing with volunteer patients
- Clarify areas of concern when using volunteer patients for Education and Examinations
- Provide a consistent approach throughout the Trust when using volunteer patients for Education and Examinations.

### **3. Definitions Used**

Competent patient: A patient who can demonstrate complete understanding of what they are undertaking and what is expected of them.

Honorarium: A fee paid for a nominally free service.

### **4. Key Responsibilities / Duties**

The Medical Education Clinical Fellows and the Undergraduate Medical Education Group will be responsible for monitoring this, Policy.

#### **Recruitment Staff**

Patients can be recruited from a variety of sources and non-clinical staff may often be the first to approach the patient, however this will be followed up with contact from a clinical member of the team who will be responsible for determining the appropriateness for individual patient involvement in clinical teaching events or examinations. Patients must be given information about what is expected of them. Patients must be assured that confidentiality will be maintained at all times and consent must be obtained using New Patient Consent Form for patient details to be held on the Volunteer Patient Database which is held by the Undergraduate team.

#### **Patient volunteer co-ordinators**

Patient volunteer co-ordinators will be responsible for obtaining up to date medical histories from the appropriate clinicians and hold in accordance with the Data Protection Act 2018 (GDPR). These will be utilised for teaching and examination purposes.

## Other Staff

All staff involved in the event must be aware that they have a duty to provide the patient with the standard of care which could reasonably be expected to be provided in any other area in accordance with Trust policies and procedures.

### **5.1 Prior to the Event**

Recruitment of volunteer patients to the Volunteer Patient Database must be the responsibility of designated professionally qualified clinical nursing or medical staff with experience in patient assessment, e.g. Trust medical staff, GP's, Clinical Educators, who must ensure that the patient is fully aware of their own diagnosis. The recruiting staff must also give the patient the opportunity to decline to take part, particularly those patients who have been involved in teaching sessions or examinations by medical students during a previous in-patient stay.

Volunteer patients must be given written information about the event and a full explanation of what it entails and expectations. This can be in the form of a leaflet, letter or email. A point of contact must also be given for further queries.

Consent which is informed, voluntary, continuing and given by a competent patient must be obtained. In giving consent, volunteer patients must be reassured that refusal to participate will not affect their standard of care or treatment in any way. Consent may be verbal or implied, as attendance to take part implies consent. However, if patient information is to be kept on a database then written consent to this must be obtained.

Volunteer patients must also be advised that any information regarding their medical condition and personal details will remain confidential. All staff and students involved in the event must be aware of the importance of confidentiality.

Volunteer patients must be informed that a small honorarium will be provided as a recompense for their expenses. The amount paid should not be enough to constitute an inducement, which could invalidate consent.

Medical records should not be accessed without a volunteer patients prior consent, however, it may be necessary to check for the deceased status of a patient prior to contacting them after a prolonged period of time without contact.

### **5.2 The Day of the Event**

All staff must be aware that they have a duty to provide the volunteer patient with the standard of care which could reasonably be expected to be provided in any other area and follow Medical Education guidance on best practice for patients on arrival and departure.

Equipment must be available at all times with which to manage the deterioration of a patient's condition or an emergency. Staff must be able to use the equipment available.

In the event of the deterioration of a volunteer patient's condition they should be treated and transferred appropriately.

In the event of a volunteer patient suffering a cardiac arrest the Resuscitation Team should be called and resuscitation procedures commenced by local staff as indicated in the Resuscitation Policies and Procedures Manual.

During educational events and examinations patients sometimes solicit medical advice. This should be treated sensitively by examiners and other staff, but the patient should be referred back to their GP or existing Consultant.

### 5.3 Following the Event

All volunteer patient information should be dealt with appropriately as per the Caldicott recommendations and the Data Protection Act, 2018.

If an adverse or unexpected situation has occurred involving a volunteer patient then an Patient Safety Incident Reporting Framework (PSIRF) Form must be completed and details of the occurrence communicated to the patient’s regular healthcare team. This should be the responsibility of the organiser of the event or examination, following debriefing of witnesses present.

## 6. Monitoring Compliance and Effectiveness

Monitoring Requirement:	Monitoring of the Trust Policy for the use of adult volunteer patients for participation in education and examinations
Monitoring Method:	The recruitment database for volunteer patients Volunteer patients’ evaluation (PSIRF) of any untoward incidences
Report Prepared by:	ACP Teaching Fellow
Monitoring Report Presented to:	Undergraduate Medical Education Group (UMEG)
Frequency of Report:	Annually

## 7. References

Caldicott Committee Report (1997) on the review of patient-identifiable information London: NHS Executive, 1997

Data Protection Act 2018 London: Stationery Office

General Medical Council, Patient and public involvement in undergraduate medical education (2011) Section 42

University Hospitals Derby and Burton NHS Foundation Trust, Consent and Mental capacity Act Policy, 2020

University Hospitals Derby and Burton NHS Foundation Trust, Data Protection and Confidentiality Policy, 2018

University Hospitals Derby and Burton NHS Foundation Trust, Information Governance Policy, 2019

University Hospitals Derby and Burton NHS Foundation Trust, Records Management Policy, 2019

University Hospitals Derby and Burton NHS Foundation Trust, Resuscitation Policies and Procedures Manual, 2019

University Hospitals Derby and Burton NHS Foundation Trust, Risk Management – Strategy and Supporting Policy (Including the assessment and management of risk) 2018

Sayer M, Bowman D, Evans D, Weisser A, Wood D. (2002) Use of patients in professional medical examinations: current practice and ethicolegal implications for medical education BMJ 2002;324:404-7