

N^{mic} Diploma - Clinical Placement Information for Mentors

Course aim

To empower experienced health care professionals to manage problems presented by people requesting urgent consultations in primary care, and enable them to expand the range of their professional practice.

Who can be a mentor?

A mentor can be either a practising GP or a clinician already qualified in minor illness who has been assessed and accredited by one of our course tutors. Educational experience is essential.

Planning support

We recommend that you arrange clinical observation or supervised sessions with your student lasting 3-4 hours once a week. Appointments should be 15 minutes ideally, to allow time for teaching or seeking advice. Planning is needed to ensure the cases seen are relevant to minor illness management. A temporary change to the appointment system may be necessary to help achieve this.

For students new taking on a new role in minor illness, aim for the following:

- 6 weeks observation of a clinician experienced in minor illness
- 12 weeks supervised – closely initially, then with support at hand
- 8 weeks student working solo – with support whenever they need it

Observation phase

During this 6-week period the student will be observing you (or an experienced colleague) manage patients presenting with minor illness, with time for discussion after each case. Consultation skills will have become second nature to an experienced practitioner. It is essential to explore this aspect of your work with the student. In addition to the management of the patient's clinical condition, you will need to discuss the use of consultation skills such as the detection of non-verbal cues and the discovery of hidden agendas.

Supervised phase

Over the next 12 weeks the student will be leading the consultation, with you observing (closely at first) then later, as the student develops appropriate confidence, by being on hand to provide easily accessible help when needed. There needs to be time available to debrief afterwards, both to enhance the educational value and to provide a safety net.

Solo phase

During this 8-week period the student will be seeing patients alone, but with you or an experienced colleague readily available in case of queries. After each clinic, protected time should be allocated for the student to discuss the cases with you. Video recording of the consultations can provide an invaluable aid to learning, but is not a requirement of the course. If you do not have access to a video camera, you may be able to borrow one from a local GP trainer. Signed, informed consent is required before the recording is made, and afterwards to ensure the patient remains happy with their decision. Patients have the right to review the recording and should be aware of the time when it will be erased. There must be a protocol in place to store the recording securely at all times, and erase it within a set time when it is no longer needed.

Throughout, inform patients who will be in the consulting room. They may need to be offered a consultation with the person who they feel is most appropriate to deal with their problem, or they may prefer to consult with only one person, which may preclude teaching.

After six months, the student should have achieved a standard for safe practice in the minor illness setting. The Manual of Clinical Competencies is designed to document the conditions that they have seen and to identify those that they still need to see. Students are encouraged also to keep a log of their learning to help identify unmet learning needs. By the end there will still be conditions that are puzzling and those that they may feel unable to deal with, but there is always the safety net of referring on to a more experienced colleague.

Impact on the organisation

We appreciate that there may be some difficulties in arranging a suitable time when both mentor and student are able to devote 15 minutes to each consultation and subsequent discussion. The benefits to the organisation come later, when the student is fully competent to manage many of the patients who seek urgent appointments. Our experience with our four practice nurses who took on this role, following the course and accreditation, is that 94% of requests for on-the-day appointments are managed without need for referral to a GP.

What else is there to consider?

- access to computer system & printer
- timetable / room allocation
- changes to clinicians' working hours
- effects on payroll
- information for receptionists (e.g. who is suitable for a minor illness appointment? – some practices use the list of conditions in the Minor Illness Manual, described for non-clinicians)
- information for patients
- system for signing prescriptions (if the student is not a prescriber)
- equipment to purchase for the student (see below)

Recommended equipment the student will need

Equipment	Approximate cost (£)
Littman Master Classic II S.E. stethoscope	90

Keeler Standard Otoscope 2.8V (C-cell)	130
Braun aural thermometer	35
Axillary thermometer (for babies under 4 weeks)	5
Torch	Supplied on our course
BNF / BNFC	Free online
EN13826 Peak Flow Meter	10
Pulse Oximeter adult	60
Pulse Oximeter paediatric	110
Total	£440

Stock items:

- Placebo inhalers for demonstration
- Disposable earpieces for thermometer & otoscope
- Detergent-based wipes for cleaning stethoscope
- Fluorescein strips or minims
- Urine test strips (including nitrite and leukocyte tests)
- Tongue depressors

Once trained, what can the student do?

As specialists in minor illness they will be competent, highly trained health professionals, able to see most patients with undifferentiated problems safely. They will have a holistic approach with insight into the possibility of a hidden agenda and knowledge of up-to-date evidence about the management of minor illness. They will be able to assess the patient, make a diagnosis, and recommend or prescribe treatment. Independent prescribing integrates with these skills to provide a seamless service. Without this, medication that requires a prescription will need a prescriber to check and sign any prescription (or the use of patient group directions where appropriate). By increasing their skills in communication, they can provide advice on self-care to empower patients to deal with many problems themselves.

N^{mic} National Minor Illness Centre

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