FACULTY OF HEALTH
School of Medicine

YEAR 4

ELECTIVE PROGRAM
2015
Introduction

The 4th year elective program provides opportunities to extend your understanding of clinical medicine by exploring other health systems, cultures and training environments or delving deeper into existing health care interests.

You are able to choose, within some limitations, a place and supervisor anywhere in the world. You will also determine what your focus of learning will be and how to get the best out of your attachment.

For many students the elective experience allows you to visit interesting places, discover much about yourself and consider your future career in medicine. It provides a chance to reflect on wider issues such as the ethics, geopolitics and globalisation of health care and the role of doctors in health delivery.

We hope you seize this opportunity and design an elective experience based on your personal learning needs and ambitions. You may make a significant contribution to the health care of a community during your stay and discover a two way exchange of knowledge and culture.

It is important to remember you are an ambassador for the University of Tasmania and not just an independent medical tourist. Being a UTAS student may open doors for elective experiences but also carries responsibilities - to demonstrate the quality of our medical school and high level of professional and ethical behaviour.

All 4th year students are required to organise and complete an elective placement at the end of 4th year, before the commencement of first semester the following year. This elective however is officially considered to be part of the 5th year curriculum, with assessment components (log book/reflective piece, supervisors report and peer presentation) embedded into the 5th year syllabus. Written submissions should be inserted into your portfolio for possible assessment in the end of year Portfolio Interview.

This booklet provides advice about how to plan your elective and optimise the effectiveness of your elective experience.

We cannot guarantee that all arranged electives will be approved, despite an acceptance letter from a supervisor or elective officer in another institute. Health Departments in different states and territories of Australia may have restrictions on medical students that you and those assisting you will not have knowledge about. Destinations that are deemed a risk to your personal safety (e.g. DFAT Classification 3 & 4) are another reason for not approving elective plans.

To avoid delays and disappointment (if any restrictions apply) we encourage that you organise your elective early in the year so we can assist you in this matter.

The dedicated staff at the School of Medicine can help you with planning and executing your elective. Please ask for assistance early in your planning process.
The important messages are:

- Make the most of this opportunity to enhance your learning and development
- Start planning as early as possible
- Get the necessary paper work in on time
- Attend the compulsory Pre-Departure Workshop in your clinical school
Contacts

Dr. Nick Cooling
Director of Electives
School of Medicine
Level 2, MS02
Email Address: Electives@med.utas.edu.au
Direct Email: Nick.Cooling@utas.edu.au
Phone: 6226 4663

Tim Grimsey
Elective Administrator
School of Medicine
Private Bag 34
HOBART TAS  7000
Email: Electives@med.utas.edu.au
Phone: 6226 4861
Learning Objectives

The general learning objectives of an elective can include:

- Further development of knowledge in medicine and/or surgery
- Expand on a specialty training experience in a field not offered in Tasmania
- Obtain experience that may influence subsequent career orientation
- Experience a different type of health care delivery from that practiced in Australia
- Experience a different culture and society and learn how that impacts on concepts of health and disease
- Obtain a short introduction to research methods

It is recommended that you develop learning objectives relevant to your own proposed elective destination. These objectives can be derived from the above list and the four themes of the AMC Graduate Profile:


Learning from your electives often isn’t predictable and you may discover your main learning is quite different from your initial plans. Being open to different and unexpected learning outcomes is important to optimise the elective experience.
Planning Your Elective

Planning your elective dates depends on the timing of final exams (see http://www.utas.edu.au/__data/assets/pdf_file/0008/611819/2015-MBBS-Calendar.pdf), duration of your elective, and risk of supplementary exams.

**Departure:** While you can depart any time from 14 November 2015, we recommend not starting your elective before 27th November 2014, when the exam results are released.

**Return:** Your elective must be completed no later than 29th January 2015 to ensure you are back in time for the commencement of 5th year.

**Supplementary exams:** Any students who commence travel to their elective destination before exam results are released, and are subsequently required to return to Tasmania for any clinical or written supplementary exams, **must** return to Tasmania for these exams (no distant exam sites will be arranged). **You will be required to pay all costs associated with you return trip to Tasmania.** Travel insurance will only cover you if you have not already left the state.

**Assessment:** All components of the elective must be completed before you start Year 5. Assessment of the elective will be part of Year, 5 Semester 1 results.

The duration of the elective is a minimum of four weeks and maximum of eight weeks. You are allowed to include research in your elective but at least two weeks of the elective must be in a clinical setting.

There are many options regarding your elective destination. They include primary care, hospital departments and specialised clinics. Locations can be anywhere from clinical settings in Tasmania (e.g. RHH, LGH & NWRH) to overseas locations. Acceptable electives can also include attachments with individual medical practitioners in Australia or overseas.

Non clinical electives in a para-medical area e.g. medico-legal, ethics, community development can also be considered as long as a period of two weeks minimum involves some clinical exposure.

Electives can be undertaken at more than one location and in more than one specialty. We would recommend you only do one or two specialties or locations during your elective to ensure continuity and more in-depth learning.

You can explore elective opportunities by:

a. Asking students who have previously been on electives about their experience
b. Looking up relevant web sites e.g. [http://www.electives.net/](http://www.electives.net/) and [Projects Abroad](http://www.projects-abroad.org/projects/medicine-and-healthcare/electives/)
c. Read elective reports at the Clinical Library, e.g. recipients of the Kathleen Menzies Award
d. An excellent guide to planning your elective can be found at the University of Queensland, School of medicine web site: http://www2.som.uq.edu.au/som/CurrentStudents/globalhealth/Documents/UQMS%20Guide%20to%20Electives.pdf

e. An international database The Lancet Student can be found at: Elective reports from all round the world: http://www.thelancetstudent.com/legacy/category/electives/

f. The Electives Network http://www.electives.net/ Join for free by becoming a student member of MDA national. Extensive database with student reports and tips

g. UTAS Electives database found at: http://www.utas.edu.au/medicine/medicine/programs/smile

h. You may wish to use one of the private companies who assist students with preparing their elective e.g. Antipodeans Abroad, Medics Away or Gap Medics. See http://www.utas.edu.au/medicine/medicine/programs/smile for a list. There is a cost to using one of these ‘elective brokers’ and we would prefer you organise your own elective as the logistic preparation is part of the learning experience

i. Asking at your clinical school for partnerships with UTAS. This enables special access of UTAS students to certain locations. See http://www.utas.edu.au/medicine/medicine/programs/smile

Click - “Fourth-year Elective Program” then “Where to go”

- RCS- Nepal & Iceland (A/Prof Peter Arvier)
- LCS- Sweden (A/Prof Kim Rooney)
- HCS-Brazil, Vietnam, Indonesia & Fiji (Dr. Nick Cooling)
Locations - Were You Cannot Go

There are some locations where you will not be allowed to conduct an elective. This is usually because of safety considerations or because a location is unable to take medical students. The Australian Government through the Department of Foreign Affairs and Trade (DFAT) issues travel advice through its website, smartraveller.gov.au. There are classifications pertaining to the level of risk which will be the primary consideration by UTAS before approval for an Overseas Based Elective will be granted.

UTAS has determined any destination which is subject to an “Advice against travel” / “Do not travel” classification will not be approved under any circumstances. Further, those destinations which are subject to a “reconsider your need to travel” advice need to be approved by the Provost at UTAS and will only be approved under special circumstances.

While on elective overseas, students may be requested to immediately return to Australia if the destination's travel advisory status changes to either of the above travel classifications during the period of their stay.

Elective in Australia

Some Australian hospitals/institutions have restrictions or advice regarding elective terms at their institution. You should ensure that you provide all the required documentation when applying.

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<thead>
<tr>
<th>Web Address</th>
<th>Special Requirement</th>
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<tbody>
<tr>
<td>ACT</td>
<td>Currently no electives in ACT</td>
</tr>
<tr>
<td>WA</td>
<td><a href="http://www.meddent.uwa.edu.au/students/electives">http://www.meddent.uwa.edu.au/students/electives</a></td>
</tr>
<tr>
<td>QLD</td>
<td><a href="http://www.health.qld.gov.au/sop/content/blue_card.asp">http://www.health.qld.gov.au/sop/content/blue_card.asp</a></td>
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**Workplace Integrated Learning (WIL) Placement Agreement**

This is an agreement that is required for all elective destinations except those in Tasmania and Western Australia. The WIL sets out the responsibilities of the host and sending (UTAS) institutions, see Appendix 3. A WIL will be provided for students during the month of October, they will be retained at administration at your Clinical School for your collection. They need to be taken with you on your elective and you need to get them signed by your supervisor or elective coordinator and be returned to your clinical school before the commencement of 5th year.
Applying to Host Institution/Hospital

Organising a supervisor

We require all students to be supervised whilst on elective. This supervision is preferably performed by a doctor. Day to day supervision can occur through another health professional but having a designated medical supervisor overseeing your activities is important. There are medico-legal as well as educational reasons for this. The final supervisors report can be completed by a non-doctor but needs to be counter signed by a doctor.

The supervisor must not be a relative or family member.

Communicating with the host institution

Make an appointment through the appropriate administration (i.e. office or private rooms) in person, email or by telephone (if in Tasmania). Follow up immediately with a letter or email providing your name, details of when you are required to commence your elective and the time frame.

Tips for writing an appropriate enquiry letter include:

- Make sure you use a friendly but formal approach (Dear Dr Smith)
- Include subject line (Elective student - John Citizen 2009)
- Explain why you want to do an elective with them and advise them of your learning objectives
- Attach further details or curriculum vitae
- Provide contact details
- Sign off politely (Yours sincerely)
- Check your spelling

Acquiring the necessary paperwork

When applying to undertake an elective your host institution may require a letter of good standing, your academic record, immunisation status or police check. These can be obtained as follows:

- **Letter of Good Standing** - This is provided to all 3rd year students at their Elective Orientation session or earlier on request from the Director of Electives. You can photocopy this letter and use for each of your applications.
- **Academic record** - You can print off an informal academic record from your student record in the Student Centre on the UTAS website OR obtain an official stamped academic transcript (preferred by some institutions) for $10
- **Immunisation status** - You can get a copy of your immunisation status from Student Services at the School of Medicine in Hobart
Police check - You must provide to the host organisation either the original or certified copy, it is best to check to ascertain the host’s requirements as they can differ. For electives interstate you MUST BRING YOUR ORIGINAL POLICE CHECK WITH YOU.

Process for Getting Elective Approved

Due to the growing competition for placements nationwide and internationally (in some circumstances placements overseas may take 6-12 months to arrange), students must organise their elective and submit all the required data on MyLo before the end of Semester 1.

The required forms you need to complete include:

- Registration of Proposed Destination Survey on MyLO - Electives by 12th June 2015, see Appendix 2
- Infectious Disease - Form for Period of Elective Study (if travelling overseas, see Appendix 4)
- SPMS Elective Registration to be completed by 3rd October
- HIV Post exposure plan (on web site) – only for students travelling to regions with high HIV prevalence (e.g. Africa)

Approval of Elective

The criteria for approval of electives include:

- Sound educational opportunity
- Availability of suitable supervisor
- Not in DFAT level 3/4 regions
- Minimum of 2 weeks clinical exposure
- Student is not required to do any additional training as recommended by Associate Head of School
- All paperwork has been completed as above

The School of Medicine reserves the right, at any time, to not allow a student to undertake an elective of their choice if there is evidence of underperformance. If this is the case then a directed academic elective aimed at improving academic performance will then be recommended.
**Pre-departure Workshop**

All students are required to attend the Pre-departure Workshop irrespective of where they are doing an elective. The workshop date will be advised in 2015 and will be held in each clinical school. There will be material for all elective destinations and elements such as travel medicine may be assessed in the 4th year OSCE.

**Assessment**

The assessment components include:

- Reflective journal
- Supervisors report (see Appendix 7)
- Peer presentation
- Portfolio discussion. You may be asked to discuss your elective during your portfolio interview exam

Assessments are counted toward your 5th year program.

**Reflective journal**

Students are required to complete a reflective journal (previously called log book) during the course of their elective. The journal should be a minimum of ½ a page per week with a summary/conclusion at the end. The reflective journal must show how the learning objectives were achieved and provide information regarding the context of the elective, interesting cases, and aspects of culture and the local health care system. It should not be dominated solely by case studies.

The journal will be assessed by the Director of Electives. Students will be given a result of Unsatisfactory, Satisfactory or Excellent with additional feedback if necessary. This will be provided as an “Assessment of Elective” Report which should be placed in your portfolio in front of your other elective paperwork.

The journal and clinical performance review should be placed in the relevant assignment drop box on MyLo (Electives). The Clinical Performance Review form should also be scanned into MyLO. This should be done before the commencement of Year 5, Semester 1. Please ensure you keep a copy of all your documents as they form part of the 5th year portfolio assessment.

**Repeating Students**

If you are repeating year 4 and had successfully completed your elective the previous year another elective is not required, provided the Associate Head of the School does not believe an additional elective is required to assist with academic progression.

You are also required to comply with your clinical school requirements which will include either a verbal presentation, video presentation or poster presentation to your peers.
Electives in a Tropical or Developing Region

Students who are intending to complete an elective in a tropical or developing low resource region are encouraged to discuss their plans with the Director of Electives, Dr. Nick Cooling Electives@med.utas.edu.au. Students **MUST** seek advice regarding the health and safety implications of their elective from their GP, the University Health Service or from a travel health specialist at least 3 months prior to departure (see Appendix 4). It is recommended that Mantoux negative students intending to take an elective in a developing area seek advice regarding TB prior to departure and either be immunised or have a Mantoux test three months after their return.

It is worth reflecting on the cultural and ethical aspects of working in a developing country before you visit. Recommended reading includes:

http://student.bmj.com/student/view-article.html?id=smj.c7114

All students travelling to a region where there is a high prevalence of HIV e.g. Africa need to be familiar with HIV Post Exposure prophylaxis guidelines and complete a HIV Post Exposure Plan prior to departure. See Appendix 5. This will be further discussed at the Pre-departure Workshop.

If you are exposed to HIV blood products while on elective you need to contact the Director of Electives and complete the online form http://www.utas.edu.au/medicine/medicine/programs/smile/y4-electives/forms/blood-borne-pathogens-exposure (see Appendix 6).

Useful references for use in the field in developing countries can be found at see http://www.refbooks.msf.org/ and include:

- MSF - Essential drugs 2010
- MSF - Diagnosis and Treatment 2010

Working in Remote or Isolated Regions

If your elective is in remote or isolated region you are required to be aware of and comply with the UTAS policy for staff & students working in Remote areas, see Appendix 8 & 9.
Self-care

Looking after your mental health and wellbeing is always important and especially so when you are in a new environment, whether it is interstate or overseas. Information on UTAS counselling services can be found at the website:

http://www.utas.edu.au/students/counselling

Contacts:

Hobart: 6226 2697
Launceston: 6324 3787
Cradle Coast Campus: 6430 4949

Other services available:

Mental Health Helpline: 1800 332 388 (free call) or website:

Lifeline: 131114 (24 hour telephone counselling)

Sexual Health Services 1800 675 859 or website
Insurance

Medical students of this University are covered for medical malpractice insurance including USA and Canada. A copy can be located at the below website, should you need to provide a copy of the certificate as part of your application:


You are also encouraged to take out additional private indemnity insurance from a medical defence organisation such as MIPS, MIGA, Avante or MDA. Membership is free for all medical students. If you are a member you must notify the insurance company of your elective destination with appropriate details, 3-4 weeks prior to your placement. In doing so, your company will provide an emergency number and other necessary details to make your elective as safe as possible.

Personal travel insurance is also strongly recommended. You will need to ensure that it includes cover in case of the need for medical evacuation. In some circumstances your Director of Electives may ask for a copy of this cover if you are going to a high risk area.

Travel insurance companies will cover students for change in travel itinerary, if they are required to have an un-planned ‘re-sit’ exam. The terminology is important for the insurance company. You can request the Director of Electives to write a letter to the relevant insurance company for any specific student who requires a supplementary exam and state this is a “re-sit”. More information about insurance is available on the SMILE web pages.

If the host hospital does not accept the coverage for whatever reason there is no further coverage that can be purchased through the UTAS insurer.
Emergency Contact & Travel Assistance While Away

Dr Nick Cooling, Director of Electives, will be your emergency contact within the University of Tasmania while you are on your elective; his card will be handed out at the Pre-departure Workshop.

International SOS


UTAS has engaged International SOS (ISOS) to provide international travel advisory and risk management services. ISOS will provide the following interim services to authorised staff members, accompanying family members and students when travelling overseas for UTAS business purposes:

- Internet access to its full services (e.g. specific country general, security and medical advisories) as well as email updates while travelling
- Call Centre for medical advice and referrals while travelling as well other issues such as how to replace a lost passport while travelling

Access to ISOS:

- Website: https://www.internationalsos.com/en/
- Membership login: 12AYCA000109 (password not required at this time)
- Travel Emergency Card:
  - Call Centre: +61 2 9372 2468 (Reverse calls will be accepted)
  - staff can familiarise themselves with reverse charge calls from overseas via

While ISOS will be providing assistance with any medical or other issues and invoicing UTAS directly, where there is an insurable event staff members and students will be required to complete and submit a ‘Corporate Travel Claim Form’ which is available at www.utas.edu.au/__data/assets/pdf_file/0015/312027/chubb_travel_insur_claim.pdf.

In Country Security Information

1. Smart Traveller

   www.smartraveller.gov.au

   Register with DFAT for relevant country to receive email updates

2. United Nations Department of Safety and Security - (UNDSS)

   http://dss.un.org/public/

   Potential to receive daily email sit rep's, and the option to register with UN Safety team when doing regional trips, even if not an employee of the United Nations. Other useful information may be available on UXO (Landmine) locations, potential security threats and other country activities.
3. **Australian Volunteers - AYAD and VIDA, AusTraining**
   
   
   In country managers are based in each country where Australian volunteers are sent, who provide in-country support and assistance with everyday living and security arrangements. The above link contains regional offices who will be able to provide contact details for the in-country office e.g. Nepal, East Timor, Laos. If they are unable to provide considerable support to the Medical Student directly, they will be able to put them in touch with the in-country volunteers so they have access to a social/support network (perhaps more social than support).

4. **Embassy for each country**
   
   
   Sending an email to the embassy prior to arrival in a country to advise the purpose and dates of being in that country has always been really useful. It has led to cross promotion/media opportunities for both the organisation and the embassy (positive Australian PR), links with relevant organisations or introductions as well as invites to embassy events which is always fun.

5. **Emergency Counselling for Australian students overseas provided by DFAT**
   
   The Department of Foreign Affairs provides emergency services for Australians who are overseas and these services include access to Lifeline telephone counselling options for those negotiating a crisis overseas or who require counselling services whilst they are overseas. This service is available 24 hours a day, 365 days a year. This is a service for all Australians, even Australian students on an overseas study exchange, placement or field study. To access this 24/7 telephone counselling service students can ring the consulate emergency number +61 1300 555 135 and wait on the line or follow the offered selection options for different services e.g. press 2, 4, 5, 6 etc., at the time of logging this information on this website option (6) was for emergency help. Lifeline is only going to be crisis management (not therapy) but it is a 24 hours, 7 day a week option for counselling needs in emergency situations. Telephone calls to local Australian high commission/embassy/consulate in various countries can also be put through to Lifeline in Australia for the cost of a local call. If it is after hours in the country from which the person is calling their call is automatically transferred to Australia. A web link that includes the telephone numbers for the Consular Emergency Centre is: [http://www.smartraveller.gov.au/index.html](http://www.smartraveller.gov.au/index.html).
Financial Assistance

a) SOM Travel Bursaries and Scholarships

The School of Medicine administers a number of bursaries and scholarships related to electives to assist paying for your trip. They can be found here: [http://www.utas.edu.au/medicine/medicine/current/prizes](http://www.utas.edu.au/medicine/medicine/current/prizes). In addition there are prizes (e.g. Kathleen Menzies Prize) for reports on return.

b) Other general scholarships which may be indirectly applicable to electives can be found here: [http://www.studentcentre.utas.edu.au/scholarships/AwardsByFaculty.aspx?FacultyID=M](http://www.studentcentre.utas.edu.au/scholarships/AwardsByFaculty.aspx?FacultyID=M)

c) External Travel bursaries

A variety of travel bursaries are available from indemnity insurers e.g. MIGA and other external organisations

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<thead>
<tr>
<th>Organisation</th>
<th>Bursary</th>
<th>Eligibility</th>
<th>Web link</th>
</tr>
</thead>
</table>

d) OS-Help

OS-Help is a Commonwealth loan that assists eligible students to undertake some of their study overseas. Information regarding this can be found on the commonwealth government website:


The completed form should be submitted to

**Wendy Kesseling**
Student Fees Officer
Student Centre
Email: Wendy.Kesseling@utas.edu.au
Phone: 6226 7857
e) Concurrent Scholarships

Students should note that the placement requirements of a scholarship (for example, the John Flynn Placement Program) will not automatically be credited towards their elective period (currently a minimum of two weeks). Please contact the provider of the Scholarship for current guidelines and the Elective Administrator for clarification.
When You Return

- Reflect on the experience – reflective journal
- Upload to the MyLO drop box (Electives) by closing date 10 February 2016, both your logbook and supervisors report as one document, ensure you keep a copy of both for your portfolio (Some supervisors send the report direct to the Electives Administrator, if this is the case a copy will be emailed to student)
- Consider entering the TUMSS photo competition
- You will receive an assessment report from the Director of Electives early in Semester 1, place this in our portfolio
- Give a presentation of your elective experience to your peers and teachers early in year 5
  - RCS – Oral presentation (10 min) and Poster (coordinated by A/Prof Peter Arvier)
  - LCS – Oral Presentation (coordinated by A/Prof Kim Rooney)
  - HCS – Oral, YouTube Presentation or Poster (coordinated by Dr. Nick Cooling)

Recommended Guidebooks & EBooks


http://www.ucl.ac.uk/igh/undergraduate/elective_info/electivepack.pdf
4. A Guide to Working Abroad for Australian Medical Students and Junior Doctors

*Copy available in the Clinical School library
Summary

- Plan your elective early
- Contact Elective Administrators at your placement if you need help before, during or after your elective
- You can also contact the Electives Administrator or the Director of Electives at the UTAS School of Medicine for any help or advice that you may need in planning your elective
- Access emails from UTAS regularly and use the UTAS email address
- Ensure your enrolment and contact details are correct and up to date (i.e. notify changes of landline and mobile telephones). **Next of kin details must be current**
- Use a check list to ensure you have completed all the planning tasks (see Appendix 1)
Appendix 1 – Check List

1. Initial planning
   □ Reflect on the sort of experience you want to achieve
   □ Go to the elective page on the SOM website (Fourth-year Elective Program section) http://www.utas.edu.au/medicine/medicine/programs/smile
   □ Explore possibilities: Ask students who have previously been on electives their experience, look up relevant elective web sites (e.g. http://www.electives.net/), read reports in the Clinical Library from past students who have been awarded the Kathleen Menzies Travelling Prize
   □ If going overseas check that your passport is up-to-date (valid only if it has at least six months remaining from date of departure)
   □ Check out funding sources
   □ Register your elective on MyLO
   □ You should revise your Safety in Practice Form on SPMS. If there are any changes to your situation e.g. if you think your health status may impair your performance on your placement

2. Completion of UTAS Forms

   Completed forms must be submitted to Electives Administrator

   Electives@med.utas.edu.au

   □ MyLO Elective Registration Survey (online) by 12th June –See Appendix 2
   □ SPMS Elective Registration to be completed by 1st October
   □ Completion of HIV Exposure Plan (if going to affected destination) by 1st November
   □ Register your travel with DFAT
   □ Workplace Integrated Learning Placement Agreement (if required) submitted to MyLo when students return from elective.
   □ Infectious disease form – If Travelling overseas (to be handed in at workshop) see Appendix 4

3. Before you go

   □ Research your proposed destination - culture, local customs, language and dress code
   □ See your doctor for a travel health assessment including immunisations and relevant prophylaxis. Plan to do this at least 3 months before you go, as some immunisations need to be adequately spaced
   □ Buy your travel insurance and make sure your cover is adequate, especially if you are intending to travel after the completion of your elective as you will not have any coverage from the University
Ensure you have indemnity insurance - in addition to that provided by UTAS.

Students travelling overseas should consult the Australian Government Travel Advisory and Consular Service - [http://www.smarttraveller.gov.au](http://www.smarttraveller.gov.au). It is compulsory for students to register their travel details with this service.

Overseas destinations - make yourself familiar with health requirements.

Prepare medical kit for your personal use.

One month before departure contact your supervisor or the contact person to confirm all the details for your arrival.

Ensure your contact details are correct and up to date with UTAS Student Affairs and the Electives Administrator, notify of any changes in telephone numbers (including mobiles), addresses or next of kin details.

Attend the Pre-departure/Global Health Workshop in your clinical school (details will be provided by March).

If doing an elective in Australia take your police check certificate with you.

4. **Whilst on elective**
   - Write up your thoughts and experiences at the end of each week for your journal.
   - Make sure you get your supervisor's report completed before departure.
   - Be aware of who to contact at UTAS if there are any significant problems on the elective, all details on Emergency Contact card.

5. **After the elective**
   - Submit your journal, and supervisors report in one document in MyLo drop box CAM440 and keep a copy in your portfolio.
   - Debrief with the Director of Electives if needed.
   - Presenting your elective experience at your clinical school.
Appendix 2 – Registration Survey Form on MyLO (Electives)

This survey concerns your proposed elective destinations. Please complete this survey before the end of semester 1 even if your elective destinations are not confirmed.

Thank you
Dr Nick Cooling  Director of Electives & Internationalisation

**Question 1 (Mandatory)**
Mobile  Home Number

**Question 2 (Mandatory)**
Start Date  End Date

**Question 3 (Mandatory)**
What is the full name of the Hospital and or Institution

**Question 4 (Mandatory)**
What Specialisation are you planning to do;  Tick all relevant specialties

- Emergency
- Surgery
- Medicine
- O & G
- Paediatrics
- Medical Imaging
- Oncology
Total of 18 questions

Location:

- MyLO
  - Elective
    - Electives
      - Elective destination survey 2014/5
      - Electives Destination(s) Registration 2014/5
Appendix 3 – Work Integrated Learning Placement Agreement

Thank you for agreeing to take (students name)

from the MBBS Course of the School of Medicine, University of Tasmania into your workplace at:

(Referred to as “The Host Institution” throughout the remaining document) for a Work Integrated Learning Placement.

This agreement sets out the details of the Work Integrated Learning Placement between the University of Tasmania and the Host Institution on the conditions of the placement.

The person signing the agreement on behalf of the Host Institution will be the primary contact for the placement in your organisation.

Please retain a copy of this agreement for your records.

The Organisational Unit contact is available to discuss the placement and answer any questions you might have.

Timing of Placement: ................................................................................................................................................

The Work Placement Provider is expected to provide students with orientation to their workplace (including any special conditions) and provide the required level of supervision and guidance for students on placements.

Scope of Study & Supervision:

UTAS Supervision and clinical liaison to be provided:

• UTAS students are provided with extensive pre-placement training which covers personal health & safety issues, educational issues, ethics and cultural competence.
• While on placement, UTAS students are supported by International SOS, the UTAS Director of Electives and UTAS Security. The Director of Electives & Internationalisation, Dr Nick Cooling can be contacted for educational, safety or conduct problems related to the UTAS student on placement via email Nick.Cooling@utas.edu.au or mobile +61 427 285 079.
• On return UTAS students are offered a debriefing session to discuss their elective experience.

Educational objectives of the above clinical placement/s may include some or all of the following:

• Further develop knowledge and skills in the discipline offered by this clinical placement.
• Obtain experience that may influence subsequent career orientation.
Experience a different type of health care delivery from that experienced in other clinical placements

Experience a different patient profile, culture, disease spectrum and society from their previous clinical experience and discover how that impacts on concepts of health and disease.

The skills and requirements of the supervisor at the placement:

- Negotiate feasible learning objectives, and scope of practice, at the commencement of the placement.
- Provide teaching on clinical and professional issues as time and resources permit.
- Be available to provide supervision, or delegate such supervision, for tasks required of the student where supervision is necessary.
- Provide feedback to the student by considering their overall performance and indicating areas of strength and any that need attention.
- Complete a brief assessment report at the end of the placement, the TAS Learning Assessment Tools to be used is Student Performance Review Form (Year 4 – Elective), follow the link below.


- The student will also have a copy of this form, please complete and return to the student at end of the placement together with verbal feedback if possible.

Student’s Level of experience required for the placement:

The MBBS curriculum of the School of Medicine, at the University of Tasmania, is a 5 year undergraduate program. Successful completion of the first 3 years of our program would be at or above the standard of USMLE Step 1. Our medical students undertake their elective at the completion of their 4th year which would be equivalent to the USMLE Step 2.

They are expected to be proficient in history, clinical examination and limited procedural skills such as venepuncture, IM and SC injections, cannulation and catheterisation. The curriculum maps for our MBBS course are available, follow the link below.

http://www.health-science.utas.edu.au/medicine/medical-education/curriculum/curriculum-mapping

The student has also undergone successful Personal Protective Equipment (PPE) training during different units within our medical degree. These include basic surgical scrubbing, surgical gowning, fitting of gloves, fitting of surgical masks, aseptic techniques for instrument handling and hand washing techniques. Students at this level are also familiar with infection control procedures.

Course specific requirements:

- UTAS medical students are required to follow the Safe in Practice guidelines while on placement, for the policy follow the link below:

While on placement students are required to complete a log book outlining their clinical, professional and ethical observations and experiences. On return they are required to deliver a presentation to peers and Faculty on their elective experience.

The Organisational Unit will provide academic and other support to the student over the course of the work placement. The Organisational Unit contact will be available to provide advice to the student or the Work Placement Provider over the course of the placement.

**Insurance**

The University maintains an Insurance Policy covering Student Personal Accident, Public Liability and Medical Malpractice for enrolled students undertaking unpaid Work Integrated Learning placements. The University’s Financial Services administers this Policy.

Students undertaking paid workplace placements are covered by the work placement provider’s insurance.

_Thank you for hosting a UTAS School of Medicine work placement student. I hope the experience is a positive one for you and your organisation. Please feel free to contact me with any questions or clarifications._

Signed on behalf of:

---

**University Of Tasmania**

**Name:** Dr. Nick Cooling

**Work Placement Contact Details**

**Phone:** + 61 3 6226 4663

**E-mail:** Nick.Cooling@utas.edu.au

---

**Host Institution:**

**Name:**

**Workplace Learning Contact Details**

**Phone:**

**Email:**
Appendix 4 – Infectious Disease Form for Period of Elective Study

Student Name: ______________________________

Student ID: ______________________________

Student Declaration:
Details of proposed elective period of study including destination, health care facilities, anticipated learning experiences and duties, departure date and duration of stay.

Country/State of Destination: ______________________________________

Health Facility: ______________________________________________________

Departure Date: ______________________________________________________

Duration of elective: __________________________________________________

I have sought advice regarding potential infectious diseases and risks associated with travel and my learning/work experiences during the elective period of study.

Signature: _______________________________ Date: ________________

Health Care Provider Declaration:
The student has sought and received appropriate advice regarding potential infectious diseases and risks associated with travel and the intended learning/work experiences during the elective period of study.

Name: ________________________________

Signature: ______________________________

Address or Stamp:

Date: ________________________________

To be handed in to Elective Administrator at the Pre-departure Workshop – date TBA.

PDF form can be downloaded from our website - take to your travel medicine doctor to complete: http://www.utas.edu.au/__data/assets/pdf_file/0018/210366/smile_txt_Form-infectious-disease-clearance.pdf
Appendix 5 - HIV Exposure Plan


Post HIV Exposure Plan

A Post HIV Exposure Plan, prepared before you leave on your elective, will:

1. ensure you have a plan to deal with exposure to HIV, and
2. reduce the stress of dealing with an inadvertent exposure to a blood borne pathogen

This plan is best prepared with advice from your supervisor at the hospital you will be visiting. Contact your supervisor well before you depart to collect the relevant information. They will know the prevalence of HIV, drug regimens available and PEP recommendations. Your supervisor may also advise you as to the appropriate HIV specialists to contact in your visited country.

Preliminary Details (pre-departure)

Before you prepare your plan you need to collect the following information.

Name

Date of Birth

Email address

Date of last personal HIV antibody testing

Hep B surface antibodies?

No

Hep A vaccination?

No

Country visiting

Aland Islands

Background HIV prevalence in that country

Common associated comorbidities (e.g. TB)
Does the visiting hospital have HIV PEP easily available? [No]

What drugs do they use?

Current first line Highly active Anti-Retroviral Treatment (HAART) in hospitals/country visited?

Does the hospital have a post HIV exposure plan? [No]

Can you obtain a copy? [No]

Who is the local/regional specialist in HIV medicine?

Contact number

Where would you get serology performed for you (and the patient)?

Supervisor name (host hospital)

Contact number

Name of the closest HIV specialist

Contact number

Institution

Director of Electives (UTAS) contact number: +61 3 6226 4663

Airline for return home travel

Contact number
A Post HIV Exposure Plan, prepared before you leave on your elective, will:

1. Ensure you have a plan to deal with exposure to HIV, and
2. Reduce the stress of dealing with an inadvertent exposure to a blood borne pathogen

This plan is best prepared with advice from your supervisor at the hospital you will be visiting. Contact your supervisor well before you depart to collect the relevant information. They will know the prevalence of HIV, drug regimens available and oPEP recommendations. Your supervisor may also advise you as to the appropriate HIV specialists to contact in visited country.

**oPEP Kit**

**Page 2 of 3**

PEP Prophylaxis kit content you will have access to while on elective

- [ ] I have purchased my own kit in Tasmania
- [ ] I am able to obtain the kit in the country I am visiting
- [ ] I have made no arrangements to access an oPEP kit
Appendix 6 – Inadvertent Exposure to Blood Borne Pathogens

Inadvertent Exposure to Blood Borne Pathogens

Highlighted fields are mandatory.

To be followed only after inadvertent occupational exposure to blood borne pathogens.

Details of Inadvertent Exposure to Blood Borne Pathogens

Page 1 of 2

Student name

Email address

Regarding the source patient:
- HIV Positive – Duration (if known)
- Viral Load/CD4 count (if known)
- Other Co-morbidities (if known)

Nature of injury and bodily fluid exposed to

Time of incident

Notify your supervisor immediately.

HIV status of the patient

Your supervisor should organise this.

Locate the HIV PEP flowchart to determine your specific risk and recommended treatment. In brief this is:
- Low risk (e.g. low risk exposure and negative patient) – no prophylaxis or
- Moderate risk – antiretroviral prophylaxis with Truvada or
- High risk - antiretroviral prophylaxis with Kaletra

This needs to start within 72 hours of exposure.

Contact the Director of Electives in Tasmania who will provide advice and liaise with Tasmanian infectious disease physicians or HIV specialists in Melbourne.

If you start the 7 day kit you must return home within one week or obtain local supplies of PEP to complete the course.

On arrival, organise urgent advice from the Infectious Disease Clinic at the teaching hospital – including further HIV PEP treatment.
Appendix 7 – Student Performance Review Information Sheet

Assessment in the School of Medicine

The School of Medicine assessment programme has been designed to test the understanding and application of core medical knowledge and skills as well as the personal and professional behaviour of its medical students.

The Student Performance Review Form

The SOM assesses student performance in the clinical setting via the Student Performance Review Form. This involves supervisor review and assessment of the evidence of a student’s clinical activity as well as their performance across a range of important elements of clinical practice.

What is expected of those completing Student Performance Review Forms?

An honest and objective rating of the student’s performance as observed during contact session/s with the student.

How do I complete a Student Performance Review Form?

When a student gives you the Student Performance Review Form, please complete each section as indicated below:

- Record the name, details location of placement and the amount of time you have spent with the student.

PART A

- Consider all aspects of the student’s performance that you or your colleagues have observed throughout the current performance period. Provide a rating for each of the behavioural domains listed in the Student Performance Review Form by ticking the option that you feel best represents the student’s performance.

PART B

- Tick the global rating you think best summarises the students overall level of performance.
- Note: the global judgement is not a summation of the individual criteria listed in the form, but an overall impression of the student’s performance as observed during each contact period. Students should be considered “satisfactory” unless their positive/negative performance warrants a different grade. If a student is Unsatisfactory, please contact Dr. Nick Cooling email Nick.Cooling@utas.edu.au.
- Provide feedback for the student by considering their overall performance and indicating areas of strength and any that need attention. Indicate whether you would have the student as an Intern or Junior Medical officer on your clinical team by ticking the appropriate box.
- Print your name and contact number, and sign and date the form.

What do I do with the completed Student Performance Review Form?

The form can be returned either to the student or mailed to:

Electives Administrator
Private Bag 34
HOBART TAS 7001
Student name ________________________________________________________________

Department/Hospital Name ______________________________________________________

Time spent with student (please cross)
☐ Little to no contact          ☐ Sporadic superficial contact          ☐ Infrequent in-depth contact
☐ Moderate in-depth contact   ☐ Frequent in-depth contact

<table>
<thead>
<tr>
<th>Part A; Rating of Student performance</th>
<th>Unsatisfactory</th>
<th>Satisfactory</th>
<th>Excellent</th>
<th>Not observed</th>
</tr>
</thead>
<tbody>
<tr>
<td>History taking skills</td>
<td></td>
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<tr>
<td>Examination skills</td>
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<tr>
<td>Communication skills</td>
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<tr>
<td>Ability to effectively exchange</td>
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<tr>
<td>information with supervisors,</td>
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<tr>
<td>colleagues and patients</td>
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<tr>
<td>Professional boundaries/Sensitivity</td>
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<tr>
<td>to patient</td>
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<tr>
<td>Maintains appropriate boundaries</td>
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<tr>
<td>with supervisors, colleagues and</td>
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<tr>
<td>patient.</td>
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<tr>
<td>Shows respect and discretion with</td>
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<tr>
<td>all patient regardless of culture,</td>
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<tr>
<td>age, gender or disability</td>
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<tr>
<td>Teamwork/Attendance</td>
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<tr>
<td>Maintains cooperative working</td>
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<tr>
<td>relationships, promoting positive</td>
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<tr>
<td>group interaction.</td>
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<tr>
<td>Participation across learning</td>
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<tr>
<td>opportunities throughout the</td>
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<tr>
<td>placement period</td>
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<tr>
<td>Resilience/Flexibility</td>
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<tr>
<td>Ability to bounce back from professional and personal set-backs</td>
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<tr>
<td>Ability to reprioritize tasks and</td>
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<tr>
<td>duties as necessary</td>
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<tr>
<td>Ethical and legal standards</td>
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<tr>
<td>Applies ethical and legal standards</td>
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<tr>
<td>in all professional situations</td>
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<tr>
<td>Clinical decision making/Knowledge</td>
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<td>base</td>
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<td>Ability to analyse, synthesise and</td>
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<tr>
<td>interpret information to form</td>
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<tr>
<td>appropriate clinical decisions</td>
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<tr>
<td>Demonstrates appropriate knowledge</td>
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<tr>
<td>and understanding of relevant</td>
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<tr>
<td>medical sciences and clinical skills</td>
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<tr>
<td>Sharing knowledge/Seeking help</td>
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<tr>
<td>Participates in a collaborative</td>
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<tr>
<td>educational role with supervisors,</td>
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<tr>
<td>colleagues and patient.</td>
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<tr>
<td>Identifies own limitations and seeks</td>
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<tr>
<td>appropriate advice or assistance</td>
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<tr>
<td>as necessary</td>
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</tbody>
</table>
PART B: Overall level of student performance

- Unsatisfactory
- Satisfactory
- Excellent

Preceptor comments:
Strengths

Areas than need attention

Have you discussed this with the student (please circle)
Yes / No

Supervisors Name: ................................ Signature ....................................................
Date: ........................................

Official Stamp

Students signature ........................................... Date: ........................................
Appendix 8 – Remote or Isolated Work Risk Assessment Checklist

From UTAS Remote & Isolated Work Minimum Standards

Remote or isolated work is work that is isolated from the assistance of other people because of the location, time or nature of the work being done. Assistance from other people includes rescue, medical assistance and emergency services.

<table>
<thead>
<tr>
<th>Identifying the risks</th>
<th>Assessing the risks</th>
<th>Controlling the risks</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>The length of time the person may be working alone</strong></td>
<td></td>
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<tr>
<td>• How long would the person need to be alone to finish the job?</td>
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<tr>
<td><strong>The time of day when a person may be working alone</strong></td>
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<tr>
<td>• Is there increased risk at certain times of day?</td>
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<tr>
<td><strong>Communication</strong></td>
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<tr>
<td>• What forms of communication does the worker have access to?</td>
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<tr>
<td>• Are there procedures for regular contact with the worker?</td>
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<tr>
<td>• Will the emergency communication system work properly in all situations?</td>
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<tr>
<td>• If communication systems are vehicle-based, what arrangements are there to cover the worker when he or she is away from the vehicle?</td>
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<tr>
<td><strong>The location of the work</strong></td>
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<tr>
<td>• Is the work in a remote location that makes immediate rescue or attendance of emergency services difficult?</td>
<td></td>
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<tr>
<td>• What is likely to happen if there is a vehicle breakdown?</td>
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<tr>
<td><strong>The nature of the work</strong></td>
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<tr>
<td>• What machinery, tools and equipment may be used?</td>
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<tr>
<td>• Are high risk activities involved?</td>
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<tr>
<td>• Is fatigue likely to increase risk?</td>
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<tr>
<td>• Is there an increased risk of violence or aggression when workers have to deal with clients by themselves?</td>
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<tr>
<td>• Can environmental factors affect the safety of the worker?</td>
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<tr>
<td>• Is there risk of attack by an animal, including reptiles, insects and sea creatures?</td>
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</tbody>
</table>
**The skills and capabilities of the worker**

- What is the worker’s level of work experience and training? Is the worker able to make sound judgements about his or her own safety?
- Are you aware of a pre-existing medical condition that may increase risk?
Appendix 9 – Remote or Isolated Work Risk Control Guide

Working alone or remotely increases the risk of any job. Exposure to violence and poor access to emergency assistance are the main hazards that increase the risk of remote or isolated work. The following factors should be considered when controlling the risks:

Buddy system

Some jobs present such a high level of risk that workers should not work alone, for example jobs where there is a risk of violence or where work is carried out in confined spaces.

Workplace layout and design

Workplaces and their surrounds can be designed to reduce the likelihood of violence, for example by installing physical barriers, monitored CCTV and enhancing visibility.

Communication systems

The type of system chosen will depend on the distance from the base and the environment in which the worker will be located or through which he or she will be travelling. Expert advice and local knowledge may be needed to assist with the selection of an effective communication system.

If a worker is working alone in a workplace that has a telephone, communication via the telephone is adequate, provided the worker is able to reach the telephone in an emergency. In situations where a telephone is not available, a method of communication that will allow a worker to call for help in the event of an emergency at any time should be chosen, for example:

- **Personal security systems**, being wireless and portable, are suitable for people moving around or checking otherwise deserted workplaces. Some personal security systems include a non-movement sensor that will automatically activate an alarm transmission if the transmitter or transceiver has not moved within a certain time.
- **Radio communication systems** enable communication between two mobile users in different vehicles or from a mobile vehicle and a fixed station. These systems are dependent upon a number of factors such as frequency, power and distance from or between broadcasters.
- **Satellite communication systems** enable communication with workers in geographically remote locations. Satellite phones allow voice transmission during transit, but their operation can be affected by damage to aerials, failure of vehicle power supplies, or vehicle damage.
- **Distress beacons** should be provided where life-threatening emergencies may occur, to pinpoint location and to indicate by activation of the beacon that an emergency exists. Distress beacons include Emergency Position Indication Radio Beacons (EPIRB) used in ships and boats, Emergency Locator Transmitters (ELT) used in aircraft and Personal Locator Beacons (PLB) for personal use.
- **Mobile phones** cannot be relied upon as an effective means of communication in many locations. Coverage in the area where the worker will work should be confirmed before
work commences. Geographical features may impede the use of mobile phones, especially at the edge of the coverage area, and different models have different capabilities in terms of effective range from the base station. Consult the provider if there is any doubt about the capability of a particular phone to sustain a signal for the entire period the worker is alone. If any gaps in coverage are likely, other methods of communication should be considered. It is important that batteries are kept charged and a spare is available.

**Movement records**

Knowing where workers are expected to be can assist in controlling the risks, for example call-in systems with supervisors or colleagues. Satellite tracking systems or devices may also have the capability of sending messages as part of a scheduled call in system, and have distress or alert functions.

**Training, information and instruction**

Workers need training to prepare them for working alone and, where relevant, in remote locations. For example, training in dealing with potentially aggressive clients, using communications systems, administering first aid, obtaining emergency assistance driving off-road vehicles or bush survival.