



Undergraduate External Medical Elective or Clinical Attachments

Updated August 2022

Undergraduate External Medical Elective/Clinical Attachments Application

The Southern Health and Social Care Trust welcomes undergraduate Medical students from Medical schools outside of Northern Ireland for elective placements in our hospitals. We also, on limited occasions, offer clinical attachments to qualified doctors wishing to gain some experience by undertaking some unpaid work experience.

1. Elective placements are offered during June, July & August each year, and are limited to a **maximum of 4 weeks**. Please contact medical.staffing@southerntrust.hscni.net if you would like to discuss the possibility of a Medical Elective outside the above months.
2. To be eligible to apply for an Elective Placement within the Southern Trust, students must have completed their 3rd year of their Medical course. Clinical Attachment applications (from qualified doctors) should have identified and agreed a sponsoring consultant/professional from within the Southern Health and Social Care Trust.
3. All students must seek medical indemnity insurance prior to submitting an application form for the dates they are requesting their elective placement. Indemnity insurance must cover medical practice (negligence); students should not be operating or carrying out tasks over and above their current level of clinical training while on placement. **This placement is an observer role only.**
 - Indemnity cover (for UK medical students only) can be obtained from either www.themdu.com or www.medicalprotection.org.
 - For students studying overseas, you can use ProTrip – in order for the malpractice coverage to be valid, both PROTRIP WORLD & PROTRIP WORLD-H insurance policies have to be purchased <https://www.protrip-world.com/?vkn=88781> & <https://www.protrip-world-liability.com/?vkn=8>

All indemnity documentation must be in English or a certified English translation if the original documentation is not in English. This must also include your name, dates of cover and the amount of monetary cover should also be noted in your indemnity documentation.

Some universities may provide their students with elective indemnity insurance. If your University provides you with this cover, please ask your University to provide an official letter confirming that these arrangements are in place. This letter should include your name, dates of cover, the amount of monetary cover and confirmation that the insurance is valid for placements within the United Kingdom.

4. As part of the application process every applicant must
 - submit a completed application form (set out below);
 - Provide a letter of Medical standing (for students - from their University);
 - Provide a current CV;
 - Provide proof of indemnity insurance
 - Suitable IELTS or OET result

Applications should be returned via email to: medical.staffing@southerntrust.hscni.net

5. All placements/attachments will be supervised by a consultant employed by the Southern Trust. They will ensure that the student's role within the Trust is in keeping with the student's capabilities and experience e.g. knowledge of ethics and patient safety.

Once we have received your application and supporting documents, the Medical Staffing Office will confirm receipt they will provide you with the names of Consultants who can be approached to seek agreement from them to act as their supervisor during the clinical attachment. The student must obtain their own Supervising Consultant. However if you have already identified a supervising consultant please indicate this on your form. You must resubmit your application form detailing who your supervising consultant will be and their signature to verify this.

We will contact you to seek an update upon your application if needed.

This pack (along with supporting documentation, i.e. Indemnity insurance, Occupational Health documents and a recent Police Background Check) must be submitted within 4 weeks. Your Police Background Check and indemnity insurance policy must be in English or a certified English translation if the originals are not in English. You will require to have an Occupational Health check prior to commencing, an appointment will be set up for you after Medical Staffing have received all your Health documents. This appointment is compulsory, you must attend failure to attend this appointment will delay your commencement.

6. Whilst on placement the student will be expected to adhere to the Southern Trust policies and procedures for the duration of their placement (i.e. dress code). Your supervisor will inform you of any specific requirements relating to your elective placement. Elective students on this scheme must, at all times, work under the guidance of their Consultant Supervisor. **At no time must students initiate clinical work**; including any investigation or treatment of patients. The Placement/Clinical Attachment may be withdrawn at any time if the individual are found to be in breach of any Trust policies or procedures or the terms of this agreement. It may also be withdrawn for any other reason at the discretion of the Medical Director. The Doctor will normally be given a reason for withdrawal of the attachment.
7. The Medical Staffing Department will keep records of student details e.g. address, email, emergency contact details, etc. These details **will not** be shared with a third-party.
8. If needed elective students may request accommodation within the Trust for the duration of their placement, this will be charged at a rate set by the Trust. However, the Trust will be under no obligation to provide accommodation or to assist in securing private accommodation. Please Note: Accommodation is extremely limited within the Southern Trust.

***Please be aware that all placements are subject to cancellation at short notice.**

Undergraduate External Elective Application Form

Please complete ALL Elective Application details in BLACK ink only if not using a computer

Title: (please delete as appropriate) Mr /Mrs /Miss /Ms /Other _____

Surname:

Forename:

Address:

Post Code:






Contact E-mail Address:	Contact Telephone Number:
Emergency Contact Name:	Emergency Contact Address:
Relationship to you:	Contact Number:
<p>Are you a UK National:</p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>If No, please provide evidence of any clearance i.e. copy of the relevant section in your passport e.g. Visa Stamp.</p>	
University you are training at:	Year of study & expected Graduation Date:
<p>Dates Requested for your elective placement:</p>	
<p>Please indicate in less than 100 words your previous training in clinical medicine involving: History taking; examination skills and your understanding of patient safety and ethics:</p>	
<p>Specialty Areas you are interested in: (Please list in order of preference)</p> <p>1.</p> <p>2.</p> <p>3.</p>	
<p>If a supervisor has already been identified and confirmed, please indicate their name and hospital here:</p> <p><i>If this has not been identified at the outset please submit application and Medical Staffing can share with you a list of Consultants who can be approached to seek agreement from them to act as their supervisor during the clinical attachment.</i></p>	
Supervisor Name:	Supervisor Signature:

	Date:
Supervisor Speciality:	Hospital Site:
Please ensure that you only submit the required documents with your completed application form: <ul style="list-style-type: none">a) A signed letter confirming your medical standing from your Medical Schoolb) A short CVc) Proof that Medical Indemnity Insurance can be obtainedd) IELTS or OET Certificatee) Visa or other right to be in the UKf) Occupational Health Documents & Vaccinations (see appendix 1)g) 3 forms of ID to submit along with your Access NI (see appendix 1)h) Equal Opportunities Form (see appendix 1)	
Is Accommodation required? <i>Please Note: We cannot guarantee SHSCT accommodation as rooms are limited. You will be required to pay normal rent charges for the accommodation.</i> YES <input type="checkbox"/> NO <input type="checkbox"/>	
If yes; please confirm definite dates required for your stay: (first come first served basis) To: From:	
Hospital Site:	
Please <u>sign and date</u> this application form in the box below: I have read and fully understand the Southern Trust Elective Policy.	
Signature:	Print:
Date:	

All completed applications should be returned via email to medical.staffing@southerntrust.hscni.net



Appendix One:

Pre Honorary Contract Checks Forms	
Occupational Health Form	 New PEHA Form 04.05.2022.doc
Vaccination Requirements	 Vaccination requirements_28.04.
Access NI	 accessni-id-validati on-form- updated Ji  ANI On line Application Process.
Equal Opportunities Form	 Appendix 8_Equal Opportunities Moni