Care Clerkship

Semester 1.2

Professional Development

Information for students and clerkship supervisors 2023-2024





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Introduction

The care clerkship is an intensive introduction to patient care and institutional healthcare. It is, therefore, an important step in the student's development to become a medical professional. During the clerkship, you will work for ten days (based on full-time employment) with the nursing or care team of a hospital or nursing home ward. During the clerkship, you will be working on the level of a nursing student doing an orientation clerkship.

This Care Clerkship Manual provides information about the care clerkship in the first year of the Bachelor's degree programme of Medicine. Clerkship supervisors can use this manual for reference purposes. The manual describes the relevance of the care clerkship to the student's professional development and its content, objectives, and organization. It describes the three phases of the clerkship (preparation, execution, and rounding-off) and the corresponding assignments. The final chapter explains practical matters and gives tips.

We hope that you will have a fruitful clerkship!

1. The care clerkship in the medical training

1.1 The care clerkship: an introduction

'Learning through observing, doing work, and experiencing what occurs in real care settings' is what the care clerkship has to offer. The clerkship will allow you to get an impression of working in healthcare and give you a better understanding of the world of patients and care professionals. Obtaining personal experiences is an important aspect of this clerkship. Attention will be paid to the following competencies: communication, leadership, and professionalism. Although the focus will be on these competencies, the clerkship will also enable you to develop other competencies.

Doing a clerkship is a type of learning in which you gain important experiences. As a novice at the patient's bedside, working in an unfamiliar environment, you will become aware of your presence, your physical reactions, your attitude, and your body language. You will gain new impressions and experiences as you encounter the care provided to seriously ill children, patients with acute or chronic diseases, elderly patients (including those with dementia), and patients receiving palliative care. These experiences may influence your outlook on healthcare and are invaluable for the development of your professional attitude. The clerkship may be the starting point for developing your awareness of your future role as a care provider.

What the clerkship mainly adds to your medical training is that it will allow you to meet people who are ill, dying, and dependent on care and on the professionals who provide it. During your care clerkship, you will have learning experiences that are indispensable to good patient care, for example: respecting the patient's integrity by being respectful and doing the right thing at the right time

- learning to cope with your feelings while encountering, touching, and caring for care-dependent people
- observing the patient's body, for example noticing skin discolouration and damage to the skin
- observing patient reactions such as pain and anxiety
- careful and skilful handling of patients during washing, lifting, or mobilizing
- communicating with patients, even if they cannot speak
- making contact with patients and being empathetic
- coping with the experience of being healthy or ill and what this means to people: what is it like to be ill or dependent on others?
- understanding the patient's perspective
- discovering how healthcare professionals collaborate and how you handle yourself in such collaborations

You are prohibited from performing medical interventions and advanced nursing activities during the care clerkship. You are not authorized to do so, also because you are not competent under the Individual Healthcare Occupations Act (the BIG law). Participating in ward rounds, therefore, has no place in this clerkship, which is not about observing medical procedures or getting an impression of what it is like to be a doctor. You are allowed to witness medical interventions resulting from direct care (= care given to 'your' patient) but only if the patient consents to your presence. Your supervisor will be a nurse or care worker.

In short, you will have learning experiences that are essential to doctors, too.

1.2 Relationship with the various pathways

The care clerkship is part of the Professional Development pathway. The preparation, the evaluation of it afterward, the clerkship plan and the clerkship report are therefore also among the teaching activities and assessment of this pathway. Ethical aspects, norms and values will be discussed in the coach group meetings. The other pathways also contribute to the care clerkship. In the Medical Communication pathway, you will learn basic communication skills: listening, asking questions, showing empathy, and so on. These competencies will also be required during the care clerkship. This semester, the Healthy Ageing pathway will focus on vulnerability and resilience. You will learn what makes people vulnerable and how the physical environment influences vulnerability and resilience, and you will consider interventions to impact these influences.

2. Learning outcomes and assessment

2.1 The competence domains and learning outcomes

COMPETENCE DOMAIN	LEARNING OUTCOMES
LEADERSHIP	 Students are able to give constructive and safe feedback. You are open to feedback on your work and functioning. Students are able to modify their behaviour if necessary based on feedback.
COMMUNICATION	 You communicate appropriately with patients both verbally and nonverbally. You can prepare an interview with a patient and gather information about factors surrounding the decision to admit admission, social determinants, and causes of vulnerability. You can prepare and apply an interview manual.
PROFESSIONALISM	 You are able to reflect on and describe the situation of a vulnerable person, care professional and care setting, You show that you have agreed to fulfil your assigs and finish work on time. You are accountable for your responsibilities, agreements, and decisions. You behave professionally in contact with colleagues and other people with whom you come into contact, in accordance with the values and standards of the profession. You know the legal position of patients and care professionals.

2.2 Assessment

The assessment of the care clerkship comprises:

- The clerkship plan, which you must write and discuss with your work supervisor before the start of the clerkship. Without a clerkship plan, you will not be allowed to do the clerkship. The plan must be included in your clerkship report.
- Assessment of your functioning by your work supervisor: the supervisor gives feedback on the relevant competencies and assigns a formative grade. These grades counts toward the final assessment of this unit of study.
- 3 The clerkship report, which the work supervisor must approve by signing it.

3. The three phases of the care clerkship

The clerkship has three phases: preparation, execution, and rounding-off. The various activities within each phase are described below.

3.1 Preparation: adequate preparation is essential!

3.1		e preparation is essential:				
1.	Reviewing the care clerkship manual	The manual describes the general rules, procedures, and learning outcomes of the clerkship.				
		Carefully read this manual and ensure that you are have organized things properly				
2.	Attending the practical preparatory lecture	To prepare for the care clerkship, you follow the PO care clerkship and alternative care clerkship practical. During this interactive lecture with simulation patients, you will get an idea of how patients receive the care they experience, and what this can mean for your attitude and interaction with patients. In preparation for this interactive lecture, you practice several care activities at home on a fellow student or another roommate (see information PD 1.2).				
		There is a wide variety of clerkships, which may take place in a ward of a somatic or psychogeriatric nursing home or a hospital department such as internal medicine, surgery, neurology, gynaecology, paediatrics, oncology, or rehabilitation. The lecture will give a general impression of the clerkship and explain various practical and procedural matters.				
3.	Writing a clerkship plan	To get the most out of your clerkship, you will have to ask yourself various questions. The learning outcomes can be realized on any care department. However, the work and the procedures you will encounter may vary enormously. It is important to translate the learning outcomes into the specific nature of the department or institution where you will do your clerkship.				
		The plan should explain what you want to learn and how you want to achieve this. You should discuss this plan with your supervisor on the first day of your clerkship. If this is not possible, make an appointment at short notice. A clerkship plan is an important tool for getting the most out of your clerkship. Without the plan, you will not be allowed to begin your clerkship.				
		The coach group meeting held shortly before the start of the clerkship will pay attention to the clerkship and the clerkship plan.				
		See Chapter 5.				
4.	Preparing yourself for the clerkship through self-study	To prepare for your clerkship, search the library and the internet, which contain numerous books and articles about nursing and/or specific consequences of health issues. Also consult the website of your clerkship institution. Brochures issued by care organizations can also be a source of information.				
5.	Completing the BLS course units	You must have completed BLS before being allowed to do your care clerkship. Therefore, make sure you register on time for this practical.				

3.2 Execution: The actual clerkship!

3.2 Execution: The acti	dar cierkship:				
Introducing yourself to the department or ward and agreeing on work arrangements with your supervisor	A coordinator will usually be responsible for clerkships within an organization. During your care clerkship, you will be supervised by a nurse or care worker who will also assess you and read your report. You will proceed to your clerkship place and discuss your clerkship plan with this supervisor.				
Supervisor	To achieve the aim of the clerkship, you and your supervisor must agree on its form and content: mutual expectations, work methods, supervision, and final assessment. This should be based on the clerkship plan. Adequate preparation and a good clerkship plan will demonstrate that you take the clerkship seriously.				
	Although students are allowed to do evening or weekend shifts during their clerkships, this may not be possible in the organization where you work. We do not recommend that students do night shifts, because experience has shown that these two weeks can be very strenuous, both physically and mentally. It is, therefore, important that you have sufficient time to rest.				
2. Learning from experience	You will perform care activities under the supervision and direction of the health professionals.				
	See Appendix 3. To learn from your experiences, Appendix 3 includes a series of questions that will help you reflect on them.				
3. Carrying out the work	You will contribute to the day-to-day patient care, not on your initiative but in consultation with your work supervisor. If you feel that too much is being asked of you, discuss this with your supervisor. Activities that you can do include: daily care activities (under supervision) - physical care: (helping to) wash and dress patients and helping them to eat and drink - making the bed with the patient present or absent - observing or assisting wound care and medication dispensing - helping patients excrete (micturition and defecation) - transferring patients between the examination and treatment rooms - transferring patients to and from recreation activities Attending patient admissions - attending a patient admission consultation, including the taking of the nursing history - drafting a nursing or care plan, the background of which is explained to you Attending reporting sessions - observation report, daily report, shift transfer report - attending a few daily rounds (possibly linked to a patient allocation system) - attending a work meeting Preparation and follow-up of medical interventions - attending pre- and postoperative care; - preparation and information of diagnostic activities Communicating - daily communication with the patient - attending a patient information session - interview a vulnerable person/patient, see chapter 6 & appendix 1 for more information about the elaboration of the interview;				

3.3 Rounding-off: *a worthwhile conclusion*

1.	Writing the clerkship report	Based on your clerkship plan, you will write a report about your learning experiences that explains what you have done to achieve your learning outcomes. After your clerkship, your supervisor will read the report and assess whether it reflects what occurred during the clerkship. Tip: Start writing your report in time! In consultation with your supervisor, set aside some time (±1/2 hours) each day to make notes or to work on your report. Take a notebook with you during your shifts. See Chapter 6 for the specific contents of the clerkship report!
2.	Evaluation and assessment interview with the work supervisor	During this meeting, you and your supervisor will discuss your experiences over the previous two weeks. The meeting and your report form the basis of the assessment as outlined on the online assessment form.
		Before this meeting, you must upload your clerkship report into the Scorion form and send the form to your supervisor. There may not always be a computer available during the meeting. If practical or desirable, therefore, you should also send the report to your supervisor by e-mail or on paper.
		The supervisor will assess whether your report reflects what has happened during your clerkship and if so, will tick the appropriate box on the assessment form.
		The supervisor will also assess your performance during the clerkship by using the Scorion form.
		If the form has not been completed, you will not receive a mark for your care clerkship and you will fail to obtain all credits for the Competency Development 1.2 course unit. You are responsible for ensuring that the online assessment form (Scorion) is completed and approved within a week of the completion of your clerkship. If this does not occur, immediately notify the care clerkship coordinator via zorgstage@umcg.nl , also describing what you are doing to do, to sort this out.
3.	Coach group meeting after the clerkship	The coach group meeting held shortly after the clerkship will be devoted to the group members' learning experiences during the clerkship.

4. Practical matters

4.1 Timetable

Introduction to the care clerkship: March 2024, see the web timetable for location and time

Clerkship periods of the academic year 2023-20234

Shift 1: week 14 and 15 Monday 1 April 2024 – Friday 15 April 2024 Shift 2: week 16 and 17 Monday 15 April 2024 – Friday 26 April 2024

Easter Monday is are during the clerkship shift 1. Whether or not you have to work on this day depends on the institution. Students can be scheduled to work. The minimum clerkship duration in this period is 9 days. N.B. Timetables for the clerkship are made by the institution.

4.2 Coordination of the care clerkship

Marieke Duursma of the UMCG's Wenckebach Institute for Educational and Training (WIOO, A. Deusinglaan 1, 9713 AV, Groningen) is the Faculty of Medicine's care clerkship coordinator. If you need information or have questions about the care clerkship, send an e-mail to zorgstage@umcg.nl.

4.3 Rules, procedures, and liability

Hospitals and nursing homes have rules and procedures governing the rights and duties of employers and employees. Clerkship students are considered to be temporary employees who do not receive a salary. Nevertheless, they do have certain rights and responsibilities. Because clerkship students are considered to be employees, they must abide by the rules and procedures applying to all employees of the facility in question. This may concern, for example, hygiene, attire, hairstyle, rings and piercings, working hours, reporting sick, the duty of confidentiality, and the obligation to carry an ID.

Clerkship students are liable for all activities that they perform unsupervised. As an employer, the organization where you will be working is liable for all activities of its employees – including students doing clerkships – during working hours and has taken out insurance to cover liability risks. If an incident should occur, therefore, students can appeal to the insurance and legal aid of the clerkship organization. However, the insurance company may invoke the right of recourse (i.e. try to recover the damages from the person who caused the incident), which is why we recommend that you take out personal third-party insurance. Many students are covered under their parents' policy. You can also take out third-party insurance for the duration of the clerkship.

4.4 Prevention of infection

To work in patient care, students must have a valid hepatitis B vaccination card. There is a vaccination programme for first-year students and if you follow it from the start, you can go on a care clerkship. Failure to participate may lead to rejection of the student by the clerkship institution.

Students will also be invited to participate in a TB/MRSA screening in the spring of 2023. A certificate declaring that you do not have TB or carry MRSA is a necessary condition for working in patient care and starting your care clerkship.

4.5 Professional attire

Health professionals are usually dressed in white, uniform clothing. Clerks are expected to wear the same attire, which increases identification, protects their clothes, and safeguards patients. Most organizations provide professional attire. However, due to logistical problems, this may not always be the case. If so, a white T-shirt and white or light-coloured trousers are recommended. Do not wear a white doctor's coat.

4.6 Medical requirements

Most healthcare organizations require staff and clerks not to pose unnecessary health risks to their patients. For this reason, you should have recently been vaccinated against hepatitis B and screened for TB and MRSA. This process must have been completed. Submit the results of your hepatitis B test (or proof that you are participating in the vaccination scheme) and TB and MRSA screening prior to the start of the clerkship or take them with you on the first clerkship day.

4.7 Travel allowance-

If you have to incur additional travel costs to reach the clerkship location by public transport, you are eligible for a travel allowance. This concerns costs that are not covered by the public transport student card. If you want to get a refund of the travel expenses incurred, you must use the online claim form. This form is available via the infonet for students (log in with your S-number).

Geneeskunde / regelsenregelingen / documentenoverigeregelingen / travel-costs

Reimbursement will be based on the price of second-class public transport. Be cost-conscious: use the cheapest route, use discount options or buy a five-ride ticket. You are allowed to use a car if you do not have a student OV-chipcard or if you have a weekend card and travel by car is cheaper than using public transport. The claim form must be accompanied by proof (the ticket(s) or your card's transaction list, which you can download from 'Mijn OV-kaart' after you have activated this option).

N.B. If you organize the clerkship yourself, you will not qualify for a travel allowance.

Travel allowance claim

To calculate the travel allowance, it is assumed that all journeys start in Groningen unless the actual distance travelled (from the place of departure to the destination) is shorter.

If you have any questions, please send an email to <u>reiskostengeneeskunde@umcg.nl</u>, go to the Student Service Desk (room 3219, first floor) or call (050) 261 6900.

Opening hours: Mondays to Thursdays from 11 a.m. to 3 p.m.

Email: ssc-balie@umcg.nl

5. The clerkship plan

You must have finished your clerkship plan before the start of the clerkship. The plan must be included in your clerkship report. If you do not have a plan on the first day of the clerkship, you will not be allowed to continue.

Length: at most 1 page (A4).

Where will I learn?

Become familiar with the care institution, the ward or department, the people it cares for and describe the following:

- the type of organization in which you will be working
- your impression of the patients it cares for
- your impression of the care it provides
- your impression of the professionals who work there
- your expectations of how these professionals interact and collaborate

What do I want to learn?

- 1) What do I expect I will be allowed to do?
- 2) What do I want to learn?
 - a. use the learning outcomes and indicators to answer this question
 - b. care activities that you would like to learn
- 3) For which learning goals do I want feedback?
- 4) What would I like to do and what am I not looking forward to?

Include the clerkship plan in your clerkship report.

6. The clerkship report

6.1 Structure

Compile your clerkship plan and report (as an appendix) into one document with a title page, table of contents and list of references, if any. State your name and student number on the title page as well as the name and email address of the work supervisor who will assess you and the name of the clerkship institution.

6.2 Deadline

Your supervisor/assessor must be able to read the report before the end of your clerkship. Therefore, make an appointment for the assessment meeting early in the clerkship. Because of variable shifts, this may be difficult to arrange if you wait too long.

6.3 Assessment

Your supervisor will assess the report in terms of factual correctness. Ensure that the feedback on your functioning is included on your online assessment form (Scorion) and discuss this feedback. Send the invitation to your Scorion form in time and upload your clerkship report.

N.B. Instructions for completing the online assessment form (Scorion) are available on www.rug.nl/zorgstage.

6.4 Content of the clerkship report

1. An impression of the work (± 300 words)

Provide a brief description of:

- what you have done, where and with whom
- what you have observed
- what has made a lasting impression on you

2. An impression of the patients (± 300 words)

Provide a brief description of:

- the type of patients
- their most common illnesses and care requests

3. An impression of the ward or department (± 300 words)

Provide a brief description of:

- the department/ organization
- the aim or aims of the care given
- the professionals who work there and their positions, activities, and responsibilities

4. Report interview vulnerable person/patient (± 300 words)

During the care internship you will interview a vulnerable person/patient at your internship site. You do this using the interview guide in appendix 1). Adapt your interview guide to the situation and the person you are interviewing.

Use the skills and knowledge you acquired in Medical Communication (communication skills) and Healthy Ageing (knowledge of vulnerability and resilience).

For this assignment you will conduct an interview and write a short report. In this report you will answer the following aspects:

- How did the interview go? How did you experience the interview?
- Were you able to obtain information about factors surrounding social determinants and causes of vulnerability? Why/why not?
- Are there any aspects that you missed in the interview manual afterward? Did it work properly?
- Finally, add the (adapted) interview manual to the appendix of your clerkship report.

5. Reflection on your learning experiences (± 900 words)

Answer the following questions, referring back to your clerkship plan:

- Was I able to learn what I wanted to learn? Did I learn more than I expected? Or less? Is it clear what else I need to learn? How will I do this?
- Did I give proper care? Where did I do less well? What should I pay attention to?
- What appealed to me during my clerkship? What did not appeal to me? Why?
- In which competencies did I grow, and how did this come about? What feedback did I receive? How did this help me?
- An elaboration of the Personal Experience Analysis

7. Preparing for coach group meeting 3

In coach group meeting 3, after the care clerkship, you will reflect on an experience you had during the clerkship. To begin with, you will thoroughly analyse an experience that you had during the clerkship. Such an Analysis of a Personal Experience is intended to help you to better understand and explain your behaviour, thoughts, and feelings so that you can grow as a professional by examining your experiences and responses in several steps and, if necessary, adjust your future behaviour.

You will complete step 1 in preparation for coach group meeting 3 and bring the resulting description to coach group meeting 3. During this meeting, groups of students will continue their analyses and discuss the next steps. For more information, consult Professional Development information on Brightspace for Semester 1.2.

Step 1: Describing an experience (ca. 250 words)

- Choose a negative or positive personal experience that you have gained during your clerkship that interests you and that you want to learn from. If necessary, use the examples in *Appendix Personal Experience Analysis*. Describe this experience or situation as concretely as possible so that the facts become clear. Where and when did it happen? Who was there? What happened exactly? What was said? etc
- Then describe your thoughts and feelings during this experience. Do so in the first person ('I ...').
- Review this description and identify the most important issue that you want to explore. What question would you like to be answered?

[Begin Step 1 here]

Step 2: Exploring the experience (analysis)

This part requires some rest, time and an open attitude, where you do not judge yourself.

- Explore this experience by asking questions.
- Create your own questions that you find relevant and meaningful in relation to your experience.
- Try to answer these questions as honestly as possible, so that you may arrive at different or new insights.

Step 3: Conclusion

- What is the most important thing you have learned from examining this experience?
- What would you like to do differently or keep the same in the future?
- Describe as concretely as possible <u>how</u> you will tackle this in the future; what exactly are you going to do?
- What will this yield for you?
- If there are still unanswered questions, mention them as well.

Step 4: Professional relevance

Describe why and how this experience is relevant to your professional development and perhaps your future career as a doctor.

Appendix 1 – Instruction interview manual

During the care internship, you will be required to conduct an interview with a patient or client and a written report of this interview will be included in your internship report. Through the interview, you want to gain more insight into the following topics:

- What makes the person vulnerable or resilient? (Consider age, lifestyle, nutrition, physical condition, etc.).
- What are indications for admission?
- How is the patient's own involvement in decisions?

Use the instruction below to prepare a brief interview guide, aimed at interviewing a patient or client from your linked healthcare facility and that will help you gain insight into the questions above.

Should you wish to use recording equipment, always seek permission from the person you are interviewing. If you have doubts about the suitability of such an interview because of the target group, always discuss this with your internship supervisor.

Literature

These instructions are based the following article: Cormac McGrath, Per J. Palmgren & Matilda Liljedahl (2019), 'Twelve tips for conducting qualitative research interviews', Medical Teacher, 41:9, 1002-1006, DOI: 10.1080/0142159X.2018.1497149

Structure

Conducting a structured interview means asking your interviewee to think about issues that may be important to him or her, in some cases even emotionally. You structure the interview in such a way so you get information about topics you have predetermined, by creating an interview guide and preferably conducting at least one test interview. The test interview can be with a volunteer (i.e. family member or roommate) and is used to review your questions beforehand.

Your interview style is essential for creating a non-threatening and open dialogue with the interviewee. Avoid using medical jargon in your research interviews and adopt lay language whenever possible.

Your interview should be structured by containing a small number of main questions (usually 5), with which you can address the topics you want to know more about. You use follow-up questions, loosely attached to the main question, to dig deeper. In general, you want to know about the following:

- Demographics
- Knowledge
- Opinions, norms and values
- Feelings
- Behavior

It is usually a good idea to open the interview with a few "easy" questions to put the interviewee at ease and familiarize him/her with the interview topic. In basic form, this can look like the following:

- Question 1: introductory question
- Question 2: introductory, key question/content
- Question 3: key question/content
- Question 4: key question/content
- Question 5: concluding question

From these main questions, you can think of possible follow-up questions in advance, but to what extent you want to stick to them depends on how the conversation goes. See below for a brief outline for the first few questions to give you an idea of a structure you can use:

- Question 1: Introduction question/how are you/etc.
 - Follow-up question: continuing to ask about getting to know you, e.g. hobbies/work/sports etc.
- Question 2: Introductory/starting in-depth question living environment, neighborhood, family composition
 - o Follow-up question: daily activities etc.

Depending on the situation and the care facility, questions from this point on can be more focused on what you want to know. Draw up at least 5 main questions in advance, and think about what follow-up questions you would like to ask also trying to imagine what follow-up questions you would like to ask.

Afterwards, review the interview with your internship supervisor and be sure to include a written report in your internship report.

Appendix 2 – Personal Experience Analysis:

Examples for Step 1: Choose a personal experience



Appendix 3 – Questions to help you learn

Attitude How do I conduct myself as a guest (student)? How do I introduce myself? How

do I keep out of people's way? How hard is it to get used to the discipline

required, the working hours, and my position as a subordinate? How do I accept the duties assigned to me? You will be confronted with your self-image and your

expectations.

Eyes Learning to observe. At first, you will see a lot – but notice only a little – of the

patients and the health professionals and the interactions between patients and professionals, between patients and their families, and between professionals.

Learning to select: what is important to observe and what is not?

Heart and stomach What do I feel or experience on the ward? My heart is pounding; what does that

indicate? Feelings of shame, discomfort, perspiration, inspiration.

Mind What are my opinions? What do I think about them? Make your own choices.

What are my normative and ethical viewpoints and decisions? When do I show

initiative and when do I watch and wait?

Hands What do I do with my hands? When do I use them, when do I place them behind

my back or in my pockets?

Listening How do I pay attention to people? When do I ask follow-up questions and when

do I refrain from doing so? How do I pay adequate attention?

Speaking How do I address people? When do I start a conversation? What do I discuss?

When do I engage actively in conversation and when do I sit on the fence? What

is the right time to explain things? How do I communicate, if a normal

conversation is not possible?

Writing Learning to write down your experiences and observations during working hours

and time off; keeping your clerkship report up-to-date.

Attire/personal care What attire is correct? What is considered correct at my clerkship place? What do

I believe to be correct? To what extent should I change my appearance to fit in,

concerning, for example, hairstyle, nails, working clothes, or uniform.

Appendix 4 – Scorion form

	B1 2.01a PD CARE CLERKSHIP
Attachment: R	eport care clerkship (include clerkship plan)
NO checkmark	plagiarism
General:	
communication	supervisor provides feedback and a grade for the competency domains: professionalism, leadership and
communication	
COMPETENCY	DOMAIN PROFESSIONALISM
De student:	
•	shows enthusiasm
•	is critical of their own functioning
•	draws up learning points based on reflection
•	is reliable and keeps promises
•	takes responsibility seriously
•	is present all days of the internship
•	is polite and respectful to colleagues and patients
•	shows empathy to colleagues and patients
•	adopts a collegial attitude towards colleagues
•	adheres to the rules of privacy and confidentiality during the internship
•	refrains from actions legally incompatible with the position of an intern
•	does not carry out any activities without consultation of the work supervisor
•	maintains a neat appearance
Feedback	
What could be	improved?
COMPETENCY	DOMAIN LEADERSHIP
The student:	
•	sets attainable and relevant learning goals (clerkship plan)
•	is open to feedback from others, asks follow-up questions and does not go on the defensive
•	if necessary, can adjust behaviour based on feedback
Feedback	
What is going v	vell?
What could be	improved?
COMPETENCY	DOMAIN COMMUNICATION
The student:	

- communicates openly
- is receptive to the stories of patients
- is respectful and correct in their interview with a vulnerable person
- adjusts their communication skills to the specific situation of the conversation partner
- reflects critically on the interview manual
- shows understanding and attention for the feelings of patients

Feedback						
What is going wel	?					
What could be im	proved?					
Internship report	corresponds to rea	lity:				
0 yes						
0 no						
Explanation						
The supervisor gra If the student perform expected, you can Rubric grades com	orms at the level th give a higher or lov	at is expected, the	student receives a	7. If the student pe	ip. erforms above or bo	elow the level
4	5	6	7	8	9	10
					Student functions	
heavily below	below	below	as expected	beyond	strongly beyond	brilliantly,
expectations, very worrying	cause for concern	expectations, but		expectations	expectations	exceptionally
	le PROFESSIONALI					
Grad	le LEADERSHIP					
Grad	le COMMUNICATIO	ON				