



University of Leeds

MSc Physician Associate Studies

CLASSROOM TO CLINIC - Year 2

PAEDIATRICS TUTOR GUIDE

2024 – 2025

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Introduction

Thank you for your continued involvement with the Physician Associate (PA) Students from the University of Leeds.

The students, who have now reached their second year of the course, will undertake a variety of different placements at acute trusts and with primary care providers, including 3 weeks in **Paediatrics**. This placement sits within a 9 week block that includes Elderly Medicine, Acute Medicine and General Medicine. There is flexibility in the timing of this placement within the rotation because it is dependent on availability within your Trust.

In year 1, each of the PA students undertook a placement at a GP practice. This placement was 1 day a week for 33 days and concentrated on learning the basics of history and examination. They have since undertaken 3 weeks in Mental Health and 3 weeks 'Introduction to General Medicine', the focus of which was to enhance student understanding of how secondary care differs from primary care, how inpatient medical care functions and how this relates to the roles and responsibilities of the members of the MDT and the patient journey.

This guide provides an overview of the learning outcomes for students during this placement, suggested activities, and how the placement will be assessed. This is to support you in providing a placement experience that meets the students' learning needs.

Thank you once again for your continued support.

Best Wishes

The Physician Associate Team

Dr Katie Cunningham, Programme Director MSc Physician Associate Studies

Sarah Howarth, Academic lead for Physician Associate Placements

Paediatrics Placement – Hours

All physician associate students from the University of Leeds will spend 3 weeks on placement in Paediatrics during Rotation 1. Our expectations are that students are timetabled 7.5-8 hour days. The core placement hours for Paediatrics are **90 hours minimum**.

Students are permitted to take 3 study days during this 9-week rotation, if also permitted by the placement supervisor.

Whilst on placement some students may be involved in campus-based teaching. This would be for a maximum of 4 half-days over the course of the 9-week rotation. If this is the case, then you will be informed in advance.

Paediatrics Placement – Learning Outcomes

The purpose of the paediatrics placement is to provide a learning experience for student physician associates in order for them to gain and build on the necessary skills needed to care for young patients with a wide range of undifferentiated urgent and emergent condition.

Students completing the Physician Associate Year 2 Paediatrics placement should have attained a level of clinical competence sufficient to allow them to conduct initial assessment of cases presenting in paediatric settings, to indicate an initial management plan for common/important conditions, and to communicate appropriately with patients, relatives and other medical professionals.

These are the objectives and intended learning outcomes of the placement and they should be met through clinical experience and wider reading.

By the end of the placement in Acute Medicine, the physician associate students should be able to:

Professional Attitudes and Behaviours

- Understand the organisation and structure of paediatric services in a secondary or tertiary healthcare setting (eg assessment and treatment units, inpatient wards, PICU, NICU, SCBU).
- Gain an appreciation that paediatric patients are also managed in community healthcare settings.
- Demonstrate effective communication and engagement with children, young people and families.

- Appreciate the breadth of different healthcare professionals that have a role in paediatric healthcare: health visitors, child and adolescent psychiatrists, midwives, child care services, community Paediatricians.
- Understand the role of a PA in Paediatrics.
- Identify and address ethical and legal issues which may impact on patient care, carers and society. For example:
 - Ensuring patient's rights are protected (eg children's rights including Gillick competency; patient and parents' right to participate in decision making about care)
 - Maintaining confidentiality
 - Obtaining informed consent
 - Providing appropriate care for vulnerable patients
- Understand how to recognise when there is a safeguarding concern and the responsibility of a health care professional in this scenario.
- Understand the role of current best evidence and how and where to access clinical guidelines and how these are utilised in clinical decision making.
- Recognise limitations of knowledge and skills and seek help when needed.
- Consider the emotional impacts of scenarios encountered on placement and strategies to manage this, including reflection and debriefing.

Clinical Skills

- Elicit a comprehensive and detailed history of a paediatric patient, adapting approach to information gathering dependant on the child's age and who they are accompanied by.
- Understand how to approach and interact with a child to obtain a useful examination.
- Utilise clinical monitoring information in paediatric patient assessment, with an appreciation for what the normal ranges are for the various parameters depending on the age of the child (eg vital signs, urine output, nutrition assessment, weight, neurological observations).
- Present a history and/or examination in a succinct and professional manner.
- Use history and examination findings to formulate appropriate differential diagnoses.

- Suggest appropriate investigations to support clinical decision making, with an appreciation for how this differs to adult medicine and why.
- Understand how to recognise when a child is acutely unwell and why prompt escalation is of vital importance in the paediatric population.

Medication Management

- Understand how prescribing in children differs to prescribing in adult medicine.
- Understand that preparations/formulations and routes of administration for medications may differ in children to the adult patients.
- Understand that dosages for medications should be checked in the BNF for Children and they are generally based on body-weight or specific age ranges.
- Understand how paediatric doses are calculated and prescribed and why including the strength and preparation of the medication in the prescription is important.
- Understand the factors that may influence adherence to taking prescribed medications in the paediatric population.

Clinical procedures

- Check temperature, pulse, respiratory rate, oxygen saturations and blood pressure (if indicated/appropriate) for paediatric patients of varying ages.
- Observe how a urine sample is obtained and analysed in paediatric patients of varying ages.
- Observe a qualified healthcare professional perform a developmental assessment.
- Observe a qualified healthcare professional perform venepuncture on a child.

Knowledge

Teaching on campus has been designed to address the learning outcomes for newly qualified PAs as outlined within the [FPA Physician Associate Curriculum](#). In year 1, students have been taught the theory underlying how core and critical clinical conditions may present, and how a PA would be expected to assess and manage these. In year 2 students are expected to apply and develop this knowledge,

recognising that there is often complexity and uncertainty associated with diagnosis and the need for appropriate supervision, support and guidance.

A key aim for physician associate students during this placement, is to understand what is normal in terms of child growth, development and behaviour before developing their knowledge of and ability to recognise pathology. They have received teaching on this during their campus week but will need to consolidate this knowledge whilst on placement.

Domain 3 of the [GMC Physician Associate Registration Assessment content map](#) outlines the patient presentations and conditions for which a newly qualified PA could be expected to assess and initiate treatment under appropriate supervision. Students may encounter a range of these presentations and conditions during this placement, as well as during their GP and Emergency Medicine placements, but should have the opportunity to be involved in the assessment and management of patients presenting with a number of the following:

Child and adolescent health	
Presentations	Core conditions
<ul style="list-style-type: none"> ★ bruising ★ crying infant ★ coryza ★ cough ★ cyanosis ★ dysmorphic features ★ diarrhoea ★ failure to thrive ★ fever ★ polyuria ★ polydipsia ★ seizure ★ rash ★ sepsis ★ wheeze ★ injury ★ testicular pain/swelling ★ penile abnormalities ★ feeding difficulties ★ limp ★ lymphadenopathy ★ pubertal development ★ floppy baby ★ vomiting ★ worried parent 	<ul style="list-style-type: none"> ★ attention deficit hyperactivity disorder ★ autistic spectrum disorder ★ common childhood infections (RSV, Croup, measles, varicella) ★ developmental delay ★ diabetes ★ epilepsy ★ febrile convulsions ★ Henoch-Schönlein purpura ★ inhaled foreign body ★ malabsorption and milk intolerances ★ mesenteric adenitis ★ non-accidental injury ★ neglect ★ testicular torsion
	Uncommon but critical conditions
	<ul style="list-style-type: none"> ★ congenital or inherited disorders ★ cystic fibrosis ★ intussusception ★ leukaemia ★ pyloric stenosis

Paediatrics Placement - Suggested Activities

Students should be provided and timetabled opportunities that enable them to develop the attitudes and behaviours, clinical skills, treatment/medication knowledge and clinical knowledge listed above. Students are also strongly encouraged to seek out their own learning opportunities. Some specific suggested activities include:

- Clerk in a newly admitted patient under supervision.
- Perform a developmental assessment under supervision.
- Spend time with other health care professionals to understand their roles and responsibilities – eg play specialist, dietician, physiotherapist, pharmacist.
- Observe the process of completing a prescription and performing drug calculations for paediatric patients.
- Attend an outpatient clinic.
- Observe how medications are administered to paediatric patients of varying ages.

Essential Components

1. INDUCTION

➤ Administrative

At the start of the placement there will be an administrative induction including the following:

- Patient confidentiality
- Access to IT facilities, and rules regarding appropriate use of PCs/internet
- Student and placement liability, and requirements for appropriate supervision of procedures
- Placement health and safety procedures and risk assessment
- Personal health, social, cultural or religious requirements of the students
- Arrangements for communication in case of sickness or other absences, or emergencies
- Who's who!

➤ Clinical

There should also be a clinical induction to clarify aims and objectives, proposed learning timetable and clarification of assessment requirements.

There should also be a clinical induction to:

- clarify aims and objectives;
- discuss the proposed learning timetable;
- clarify assessment requirements;
- clarify who the overall educational supervisor is and who is responsible for clinical supervision each day.

➤ **Attendance**

Students have their own timesheet which they complete and is reviewed by the university at the end of each term. This timesheet also needs to be reviewed by the clinical supervisor at the end of the placement (see below).

Please note students are told: *Attendance is one of the key professional attributes. We expect students to attend 100% of the sessions on the course as a mark of respect for their colleagues, staff and particularly patients.*

If they are absent while on a clinical placement, students should contact the relevant person at the placement and pastudies@leeds.ac.uk to indicate how long they expect to be absent. It is expected that they make any missed days up. If this is not possible, they must contact the PA team to decide next steps.

2. ASSESSMENT

➤ **End of Placement Assessment Form**

This can be found in the PebblePocket app and includes reviewing the Clinical Skills, MiniCex and timesheet. This should be completed by the supervisor with the student. If in doubt regarding professionalism issues please refer to the professionalism statement on the placements website which is the guidance given to students about aspects of professionalism.

If you would like to discuss problems related to a particular student please contact Sarah Howarth (s.d.howarth@leeds.ac.uk).

➤ **Clinical skills**

Students should have opportunities to be assessed and receive feedback on clinical skills (e.g. taking bloods, history taking). There are a number of mandatory clinical skills that students need to complete over the year and they should be recorded on the PebblePocket App. These can be completed by any appropriately trained professional.

For more information on these skills (what they are and what level they should be undertaken at), please see *Workplace-based assessments: Expectations of a Year 2 physician associate student*, which can be found [here](#).

➤ **Mini-CEX scenarios**

Students should have opportunities to be assessed and receive feedback on clinical scenarios they have taken part in. Students must complete a minimum of 15 by the

end of year 2. These are completed on the PebblePocket app with any appropriately trained professional.

For more information on these skills (what they are and what level they should be undertaken at), please see *Workplace-based assessments: Expectations of a Year 2 physician associate student*, which can be found [here](#).

➤ **Drug Profile Form and Reflection Forms (optional)**

Both of these forms can be completed by students if they download the form from Minerva. They are self-directed learning tools and will not be monitored but they are useful to have on record when uploaded onto PebblePad.

3. EVALUATION AND FEEDBACK

➤ **Placement evaluation form**

We collect feedback from students after each placement and use it carefully to improve aspects of the PA Studies curriculum and placements. A feedback report is provided in January and August to the Trust.

➤ **Clinical Placement Reporting Tool**

The Clinical Placement Reporting Tool allows staff and students to inform the School about the positive experiences that they've had as well as highlight any problems or issues that they may have encountered.

Staff and students have two options after accessing the Tool – 'leave a commendation' and 'raise a concern'. Commendations are intended to recognise individuals that have made significant contributions to a placement experience through their outstanding teaching, professionalism, or attitude. Both students and staff can submit feedback for one another, and the named individual will be sent the feedback instantly if an email address is provided.

Concerns should be raised if a staff member or student has engaged in behaviour that has either contributed negatively to the placement experience or falls short of the professional standards expected of their role. This includes harassment, bullying and discrimination, as well as any other behaviour that might jeopardise the delivery of safe and equitable healthcare or a supportive and effective learning environment. The School will work with individuals who submit a concern to ensure that issues are fully-investigated and action taken where appropriate.

The placement provider version of the Tool and further information can be found [here](#).

Please remember if you would like to discuss an issue that arises concerning a student (good or bad), the PA team are always happy for you to send an email or call to discuss it further.

Relevant Contacts

Dr Katie Cunningham

Programme Lead, MSc Physician Associate Studies

Email K.Cunningham@leeds.ac.uk

Sarah Howarth

Academic Lead for PA Placements, MSc Physician Associate Studies

Email: S.D.howarth@leeds.ac.uk

PA Studies Student Education Service Team

Email PAStudies@leeds.ac.uk

Additional Resources

Additional resources can be found [here](#). Such as:

- Advice on contamination incidents & needlesticks
- Physician Associate Professionalism statement
- PA student drug formulary
- Workplace-based assessments: Expectations of a Year 2 physician associate student
- Curriculum Map covering both years of the programme
- Guidance on clinical and educational supervision of a PA student