Conway, C., & Thompson, T. (2018). Department of Health must consider medical students in new plans for state-backed General Practitioners indemnity scheme. *Education for Primary Care*, 29(4), 248. <https://doi.org/10.1080/14739879.2018.1499421>

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DOH Must Consider Medical Students in New plans for State-backed GP Indemnity Scheme

The secretary of State for Health made headlines following his announcement at the 2017 RCGP conference that he would be instigating state-backed indemnity for primary care clinicians (1). This was welcome news to GPs, who do not currently receive the benefits Crown Indemnity enjoyed by hospital-based doctors. What is unclear however, is the impact of this announcement on undergraduate medical students.

A negligence claim arising against a medical student while on a placement in a general practice surgery is unlikely. However, it is currently unclear as to who would be liable if a claim arose. Many colleagues assume that medical student membership of a Medical Defence Organisation (MDO) would confer cover. It does not. Rather, liability would revert to the MDO of the doctor responsible for the supervision of the negligent student. However, in modern multi-professional community learning environments students are often learning from (if not directly supervised by) health workers other than doctors.

In a survey of 51 practices in the footprint of Bristol Medical School we found that 12 different allied healthcare professionals (AHPs) were being used to supervise undergraduate students during their general practice attachments (2). Notably, 67% of surgeries used a healthcare assistant (HCA) to directly supervise the student for some of their placement.

This is significant as, when we approached the three main MDOs (MDU, MPS and MDDUS) for clarification on their position regarding supervision of medical students by HCA's, we received a heterogeneous response. The MDU for example, stated that: *"we would not expect or allow medical students to be solely supervised by a healthcare assistant whilst on placement in general practice"*.

A policy paper, published by the Department of Health, indicates that the cover provided by the proposed state-backed indemnity scheme would include "students/trainees working in this area" (3). We feel that detailed clarification of this point is required prior to implementation. In particular, it should address the implication of supervision by the full range of AHPs used in our ever-expanding multidisciplinary teams.

References

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