

Care Clerkship

Semester 1.2

Professional Development

Information for students and clerkship supervisors

2024-2025



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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.

Clerkships are a form of learning in which you gain valuable experience. As a newcomer at the patient's bedside and in a new work environment, you automatically become aware of your presence, your physical reactions, your posture, and your body language. You are exposed to new impressions and experiences and come into contact with the care of severely ill children, patients with acute or chronic conditions, the elderly and patients with dementia, or individuals in palliative care. These experiences can shape your perspective on healthcare and are valuable for developing your professional attitude. The clerkship can serve as a starting point for becoming aware of your future role as a healthcare professional.

The most important contribution of the care clerkship is your encounter with people who are ill, dying, and/or dependent on care and caregivers. During the clerkship, you develop learning experiences that are essential for providing good patient care, such as:

- Learning to respect the integrity of the patient. Am I being respectful? Am I doing the right thing at the right moment?
- Learning to cope with your own emotions while observing, touching, and caring for dependent individuals.
- Learning to observe the body.
- Observing patients' reactions, such as pain or fear.
- Learning to work with care when washing, lifting, or mobilizing a patient.
- Learning to communicate with patients; even when someone is unable to speak, how do you interact?
- Learning to establish contact with patients and show empathy.
- Learning to understand the experience and meaning of illness and health. What does it mean to be ill or dependent?
- Understanding the patient's perspective: what is it like to be a patient?
- Discovering how healthcare professionals collaborate and how you position yourself within that teamwork.

In short: all these learning experiences are essential for becoming a good physician.

During the care clerkship, you are not allowed to perform any medical or nursing procedures. According to the Healthcare Professions Act (BIG), you are neither authorized nor competent to do so. The clerkship is not about observing medical activities or gaining insight into the profession of a physician. However, you may attend medical procedures that are part of the direct care provided to "your" patient, but only if the patient has given explicit consent.

Your supervisor during the internship will be a nurse or a caregiver.

1.2 Relationship with the various pathways

The care clerkship is part of the Professional Development learning pathway. This means that preparation, debriefing, the internship plan, and the internship report are also integral to the study activities and assessments within this track. Ethical aspects, norms, and values are discussed during coaching sessions, along with emotional reflections on the internship experiences.

Other learning pathways also contribute to the healthcare internship. In the Medical Communication track, you learn fundamental communication skills such as listening, asking questions, and showing empathy. The first assignment for Healthy Ageing this semester focuses on vulnerability and resilience. You will explore what makes people vulnerable, how the physical environment influences this, and how individuals can cope with these challenges. These topics will also be relevant during the internship.

2. Learning outcomes and assessment

2.1 The competency domains and learning outcomes

COMPETENCE DOMAIN	LEARNING OUTCOMES
LEADERSHIP	<ul style="list-style-type: none">• 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• initiates and is respectful and correct in their interview with a patient or client
COMMUNICATION	<ul style="list-style-type: none">• communicates openly with patient, client and colleague• is receptive to the stories of patient, client and colleague• is polite and respectful to patient, client and colleague• shows empathy to patient, client and colleague• adjusts their communication skills to the specific situation of the conversation partner• shows understanding and attention for the feelings of patients, clients and colleagues
PROFESSIONALISM	<ul style="list-style-type: none">• shows enthusiasm• is critical of their own actions and functioning• is reliable and keeps promises• is present all days of the internship• maintains a neat appearance• 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

2.2 Assessment

The assessment of the care clerkship comprises:

- 1 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.
- 2 Assessment of your functioning by your work supervisor: the supervisor gives feedback on the relevant competencies and assigns a formative grade. These grades count 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!*

<p>1. Reviewing the care clerkship manual</p>	<p>The manual describes the general rules, procedures, and learning outcomes of the clerkship.</p>
<p>2. Attending the care practice seminar</p>	<p>To prepare for the care clerkship, you follow the PO care clerkship and alternative care clerkship practical. During this interactive lecture, 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.</p> <p>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).</p> <p>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.</p>
<p>3. Writing a clerkship plan</p>	<p>To get the most out of your clerkship, it is important to ask yourself a few key questions. The general learning objectives (as described earlier in this document) can be achieved in any healthcare department, even though the work and procedures may vary significantly between clerkships. It is essential to translate these objectives to the specific nature of the department or institution where you will be interning.</p> <p>Your clerkship plan outlines what you aim to learn and how you intend to achieve it. You have prepared this plan together with your coach and fellow students and will discuss it with your supervisor on the first day of your internship. If this is not possible, make sure to schedule another meeting as soon as possible. The internship plan serves as a crucial guide to maximize your learning experience, and without it, you are not allowed to start your internship.</p> <ul style="list-style-type: none"> - In preparation for the second PO coaching group session, you will develop your internship plan. You may revise it based on the discussions and feedback received during the session. - Bring a printed copy of your internship plan to your first meeting with your supervisor so you can review it together. Based on this discussion, you may need to adjust the plan further as you gain more insight into the internship and its possibilities. - The final version of your plan will be included in your internship report, which you will submit at the end of the internship. <p><i>See Chapter 5, internship plan.</i></p>
<p>4. Preparing yourself for the clerkship through self-study</p>	<p>In preparation for your clerkship, you can consult resources in the library, and numerous books and articles on nursing and the specific effects of health issues can be found online. Be sure to review the information in Appendix 1, "A Healthcare Internship in a Nursing Home: What to Expect?" Even if your clerkship is not in a nursing home, this information is still highly valuable.</p> <ul style="list-style-type: none"> - Visit the website of your internship institution and check if you can find specific information about the department, the purpose of the care procedures performed, and other relevant details. - Consider which conditions or diseases you are likely to encounter frequently and take the time to study them in advance.

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.
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3.2 Execution: The actual clerkship!

<p>1. Introducing yourself to the department or ward and agreeing on work arrangements with your supervisor</p>	<p>During your care clerkship, you will be supervised by a nurse or caregiver. This person will also read and assess your internship report.</p> <p>To achieve the goals of the internship, you will make agreements with your workplace supervisor regarding the structure and content of the internship based on your clerkship plan. These agreements will cover mutual expectations, your tasks as an intern, the supervision you will receive, and the final evaluation. Good preparation and a well-thought-out internship plan demonstrate that you take the internship seriously.</p> <p>It is permitted to work an evening or weekend shift during your clerkship, though the feasibility of this depends on the institution. However, participating in a night shift is discouraged. Experience has shown that these two weeks can be both physically and mentally demanding. It is important to ensure adequate rest and relaxation.</p>
<p>2. Learning from experience</p>	<p>Under the supervision and guidance of healthcare professionals, you will perform care-related tasks. To help you consciously learn from your experiences, a set of questions has been included in Appendix 2. These questions will support you in reflecting on the various activities during your internship.</p>
<p>3. Carrying out the work</p>	<p>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.</p> <p>Activities that you can do include:</p> <p>daily care activities (under supervision)</p> <ul style="list-style-type: none"> - 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 <p><i>Attending patient admissions</i></p> <ul style="list-style-type: none"> - 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 <p><i>Attending reporting sessions</i></p> <ul style="list-style-type: none"> - observation report, daily report, shift transfer report - attending a few daily rounds (possibly linked to a patient allocation system) - attending a work meeting <p><i>Preparation and follow-up of medical interventions</i></p> <ul style="list-style-type: none"> - attending pre- and postoperative care; - preparation and information of diagnostic activities <p><i>Communicating</i></p> <ul style="list-style-type: none"> - daily communication with the patient - attending a patient information session - interview a patient/client, see chapter 6 for more information - attend a discussion/interview with the patient's family.

3.3 Rounding-off: *a worthwhile conclusion*

<p>1. Writing the clerkship report</p>	<p>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.</p> <p>Tip: Start writing your report in time! In consultation with your supervisor, set aside some time ($\pm 1/2$ hours) each day to make notes or to work on your report. Take a notebook with you during your shifts.</p> <p><i>See Chapter 6 for the specific contents of the clerkship report!</i></p>
<p>2. Evaluation and assessment interview with the work supervisor</p>	<p>During the evaluation meeting, you will discuss the experiences of the past two weeks with your supervisor. Together with your clerkship report, this will result in an assessment based on the digital evaluation form.</p> <p>To prepare for this meeting, you should email the Scorion evaluation form (with the internship report as an attachment) to your internship supervisor. Since there is not always a computer available in care settings for discussions, it may be practical or desired to send the report through mail and provide a paper copy.</p> <p>The clerkship supervisor will assess whether the clerkship report accurately reflects the reality, and this will be marked with a check on the digital evaluation form.</p> <p>The supervisor will also assess your performance during the internship via the Scorion form.</p> <p>Important: Without a fully completed form, you will not receive an evaluation of your healthcare internship, and it will not be possible to receive all points for the competency development unit 1.2. At the end of your internship, it is your responsibility to ensure that the digital evaluation form (Scorion) is completed and submitted within a week. If you are unable to meet this deadline, you must immediately inform the internship coordinator at zorgstage@umcg.nl and explain what you have done and are doing to complete it.</p>
<p>3. Coach group meeting after the clerkship</p>	<p>The coach group meeting held shortly after the clerkship will be devoted to the group members' learning experiences during the clerkship.</p>

4. Practical matters

4.1 Timetable

Introduction to the care clerkship: 30 October 2024, see the web timetable for location and time

Clerkship periods of the academic year 2024-2025

Shift 1: week 14 and 15	Monday 31 March 2025 – Friday 11 April 2025
Shift 2: week 16 and 17	Monday 14 April 2024 – Friday 25 April 2025

Good Friday (18 April 2025) and Easter Monday (21 April 2025) are during the clerkship shift 2. 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 2025. 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 reiskostengeneeskunde@umcg.nl, 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

The internship plan helps you prepare for your internship period and provides guidance in formulating learning objectives and expectations. Your internship supervisor will use this document to track your development and provide targeted feedback.

Instructions: Complete the questions below in preparation for **PD Coach Meeting 2**. During this meeting, you will further discuss the internship plan with your coach and fellow students. Then, bring the internship plan to your first meeting with your internship supervisor. Finally, include it in your internship report.

Aim for approximately one A4 page for the plan.

1. Orientation on the internship location

Familiarize yourself with the institution, department, and care recipients, and describe the following aspects:

1. **The organization:**
 - What type of organization will I be working at? (e.g., hospital, general practice, nursing home, mental health institution)
 - What type of care is provided, and for which target group?
 2. **The department:**
 - In which department will I be doing my internship?
 - What is the role and function of this department within the organization?
 - How is the department structured (organization, collaboration, hierarchy)?
 3. **The care recipients:**
 - What is my impression of the patients/clients I will encounter?
 - What are the most common illnesses or conditions?
-

2. Learning objectives and expectations

To maximize your learning experience, formulate concrete learning objectives based on the questions below. Discuss these goals with your internship supervisor at the start of your internship.

1. **What do I expect to be allowed to do?**
 - What tasks and responsibilities do I think I will have?
 - Which procedures or actions do I want to perform under supervision?
2. **What are my learning points, and where do I want feedback?**
 - Which personal learning points do I want to develop? (e.g., communication with patients/clients or colleagues, self-confidence, time management)
 - On which aspects would I like targeted feedback from my supervisor?

3. Personal expectations and challenges:

- What am I looking forward to during the internship?
- What am I apprehensive about, and how can I deal with it?

6. The clerkship report

6.1 Structure

Create a single document by combining both the internship plan (as an appendix) and the internship report. This document should include a title page, table of contents, and any relevant bibliography.

On the title page, include the following information: Your name; your student number; the name and email address of the workplace supervisor who will assess you, and the name of the internship institution.

For the specific content of the internship report, refer to section 6.4.

6.2 Submittance

Add the form "B1 2.01a PD Care Internship" to your Scorion portfolio for competency development 1.2. Upload your internship report as an attachment and send the invitation to your internship supervisor's email address.

Note: Instructions for filling out the digital evaluation form (Scorion) are available at www.rug.nl/zorgstage.

6.3 Assessment

Your supervisor/assessor must be able to read the report before the end of the internship. Make an arrangement early in your internship about when this will happen so that everything is clear by the last day. Due to varying shifts, it can be challenging if you wait until the last moment.

6.4 Content of the clerkship report

The clerkship report consists of four parts:

- A report containing your impressions and experiences from the internship and your tasks.
- A report of the interview you conducted with a patient or client.
- An elaboration of the photo assignment on care and sustainability.
- As an *appendix*: the initial clerkship plan.

Below, the first three sections explained in more detail, including the approximate word count these parts should meet. These are guidelines, and you may deviate from them as needed to properly report your findings. When combining the different sections, consider the format as described above.

6.4.1 part 1: clerkship impressions

During the clerkship period, you will likely see and do many (new) things. For this section, you will elaborate on these impressions and tasks.

Tip: Take a moment each day, for example during your commute or at a quiet moment during care, to briefly write down what you saw and did. This way, throughout the clerkship days, you will already have a rough draft of this part of the report and will only need to update it.

1. An impression of the work (± 250 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 (± 250 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 (± 205 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. Reflection on your learning experiences (± 500 words)

Use your clerkship plan for the for the following questions:

- 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?

6.4.2 part 2: patient interview

During your care clerkship, you will interview a patient or client. The goal of this interview is to gain more insight into the patient/client, their care needs, and their experiences with care and the overall organization of care. You will write up the interview in a short report (approximately 750 words), and this will be included in your clerkship report.

You have the freedom to shape the interview as you see fit. However, the physical and mental condition of the patient/client will determine the extent to which the interview can take place. The interview can be conducted in one session, but it may also be possible to speak with the patient/client multiple times over the course of several days. Keep the following practical points in mind:

- The interview and the report should be anonymous, meaning no personal information should be identifiable.
- Always consult with your internship supervisor or the involved healthcare professional about what is and isn't possible.
- Always ask for the patient's/client's permission for the interview and explain the purpose behind it.
 - o If you wish to make an audio recording of the interview, ask explicit permission for this and delete the recording after use.

Content

Use the following questions as a guide to structure your interview. You do not need to answer all of these questions, and you are free to dive deeper into a topic if the opportunity arises.

1. General Information

- o **General characteristics of the patient (anonymously):** Age category, background, medical situation (without identifiable details).
- o Reason for admission or care need: What condition or situation led to admission or treatment?

2. Vulnerability and Resilience

- o **What makes the patient vulnerable or resilient?**
Think of factors such as age, physical and mental health, lifestyle, nutrition, and social environment.
- o **How does the patient experience their current situation?**
Is there acceptance, uncertainty, or hope for improvement?

3. Involvement in Care and Decision-Making

- o How is the patient informed and heard by healthcare professionals? Do they find this approach satisfactory?
- o To what extent does the patient have a say in their treatment?

4. Impact on Daily Life

- o **Independence:** Can the patient still perform activities like self-care, household tasks, or hobbies?
- o **Support and Assistance:** Does the patient have access to help, such as informal caregivers or adaptations at home?

5. Personal Experience and Future Perspective

- o What does the patient consider the most important aspects of quality of life?
- o What are the patient's expectations for the future, and what concerns do they have in relation to this?

Literature and Support

On the following page of the University of Groningen (RUG) website, you will find many tips and resources for conducting a journalistic interview: [Journalistic Interviewing | Interviewing | Language Centre | University of Groningen](#). Additionally, consider the communication skills you've gained from the medical consultation curriculum, as well as the knowledge about vulnerability and resilience that you received from the HA Assignment 3.

6.4.3 part 3: photo-assignment care and sustainability

Climate change has significant consequences for health and the environment. It is therefore essential to identify all sources contributing to climate change, one of which is the healthcare sector. The healthcare sector in the Netherlands contributes around 7% to the total greenhouse gas emissions (RIVM, the effect of Dutch healthcare on the environment, 2022). See Appendix 2 for background and further information on this topic.

Where care is provided, a lot of waste is generated, primarily through the use of medical disposables: single-use products that are used only once. For this assignment, you will document this on a small scale (literally).

Take a photo of a form of waste that results from a specific caregiving activity you frequently observe during your internship. Think of food scraps, packaging materials, or possibly materials from a specific department or caregiving procedure. This photo should be included in your report, with the following elaboration.

Requirements for the photo:

- Focus on one product or action.
- The photo is anonymous: neither the person nor items are traceable.

Photo: [Insert your photo with a relevant title]

Provide a short elaboration based on the following questions:

- **What do you see?**
Describe the content of the photo and the type of waste that is produced.
- **How much waste is produced per day or week?**
Provide an estimate based on your observation.
- **What stands out about the waste production in the institution?**
Consider the amount, type of waste, and the extent of waste segregation.
- **Is this topic receiving attention?**
Is it discussed among healthcare workers? Are there posters or other attention-grabbers for waste reduction and sorting?
- **Inspiring example:**
Have you seen an example within your internship location where waste prevention or sorting is well managed? Briefly describe how this is implemented in practice and its impact.

7. Appendix 1 – A care internship in a nursing home: what can you expect?

There are broadly three types of departments in a nursing home. The Geriatric Rehabilitation Care (GRZ) is for people who are recovering, as the name suggests. They usually come after a hospital stay to rehabilitate with the goal of returning home.

If this is not possible, they will be assessed under the [Long-Term Care Act \(WLZ\)](#) to receive the necessary care for long-term residence in the nursing home. Diseases commonly found in GRZ include: stroke (CVA), hip fractures, lower limb amputations, general weakness after prolonged illness with ICU stay, etc.

In addition to GRZ, there is the Psychogeriatric department (PG). This department is for people with some form of dementia, and they generally will not return home. In the past, these were mostly closed units, but in 2020, the [Law on Care and Coercion](#) was introduced. The purpose of this law is to limit the restrictions on personal freedom as much as possible. As a result, more PG departments now operate under an open-door policy. More information on this can be found in this episode of [Pointer](#).

Finally, there is the Somatic Department, where people live who need 24-hour care due to physical causes. This includes patients with Parkinson's disease, Multiple Sclerosis, or hemiplegia after a stroke (CVA).

What is characteristic of all departments is that the patients usually have multiple health issues. While there is typically one primary reason for their stay, comorbidities play a significant role in the care.

Although most patients are older, younger patients can also be admitted to the nursing home.

Other Disciplines

A key feature of nursing home care is its multidisciplinary approach. Together with other professionals, you work to make the final stages of a person's life as pleasant as possible. The care and nursing are provided by various roles, including nursing assistants, practical nurses, and registered nurses (both MBO and HBO). There are also various paramedics such as physiotherapists, occupational therapists, speech therapists, spiritual caregivers, social workers, dieticians, and psychologists.

Within the medical team, you will find specialists in elder care, along with AIOS (specialist training doctors) and ANIOS (doctors not yet in specialist training), as well as nurse specialists (VS) and physician assistants (PA). During your care clerkship, there will be plenty of opportunities to observe and work with other disciplines. For example, a physiotherapist can teach you a lot about mobility and how to help a person move, a dietician can explain malnutrition, and a speech therapist can teach you how to communicate with someone with aphasia, to name just a few examples.

Possible Activities During the Care Internship:

- Observing and possibly participating in caregiving activities
- Assisting with meals
- Engaging in an activity with a resident (e.g., walking, playing a game, drinking coffee, reading the newspaper)
- Attending organized activities by the activities coordinator
- Attending a family discussion
- Attending a multidisciplinary meeting
- Observing nursing procedures: ask if you can read the protocols before the procedure is performed
- Observing therapy/research by other disciplines

Background Information

A website offering a lot of information about working in elderly care is www.zorgvoorbeter.nl. This website provides practical information on elderly care, both at home and in nursing homes, as well as care for chronically ill patients on various topics, from dementia to physical care.

Interested?

If the target group in the nursing home interests you, there is a specialization in becoming a doctor specifically for nursing home residents and vulnerable elderly people living at home: the Specialist in Elderly Medicine (SO).

To get an impression of the work of an SO, you can visit the website www.ouderengeneeskunde.nu. This site offers extensive information about this rewarding specialty.

In your medical education, you will also encounter this specialty, both in the regular curriculum and in parts where you have some freedom of choice. For more information, visit the [websites of Primary Care Medicine and Long-Term Care](#).

Appendix 2 – 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 3 – extra information on planetary health and sustainability in healthcare

Introduction:

Health requires more than just good medical care. Factors such as clean air, pure drinking water, sufficient biodiversity, and the mitigation of extreme weather events play a crucial role in promoting our health. Global warming, driven by greenhouse gases such as CO₂, presents a serious threat in this regard (Gupta 2019). To protect our environment, it is essential to reduce our CO₂ footprint. Since human activities contribute to CO₂ emissions everywhere, the healthcare sector can also play an important role in reducing these emissions.

With nearly 30% of government spending, the healthcare sector is the second-largest expenditure item after social security, and with 15% of the workforce, it is the second-largest industry in the Netherlands. The healthcare sector emits approximately 11 megatons of CO₂ annually, which is comparable to the combined emissions of Tata Steel and the RWE power plant in Eemshaven (Gupta 2019). Dutch healthcare is responsible for 7% of the country's total CO₂ emissions, 4% of all waste (328 million kg per year), and consumes 13% of raw materials.

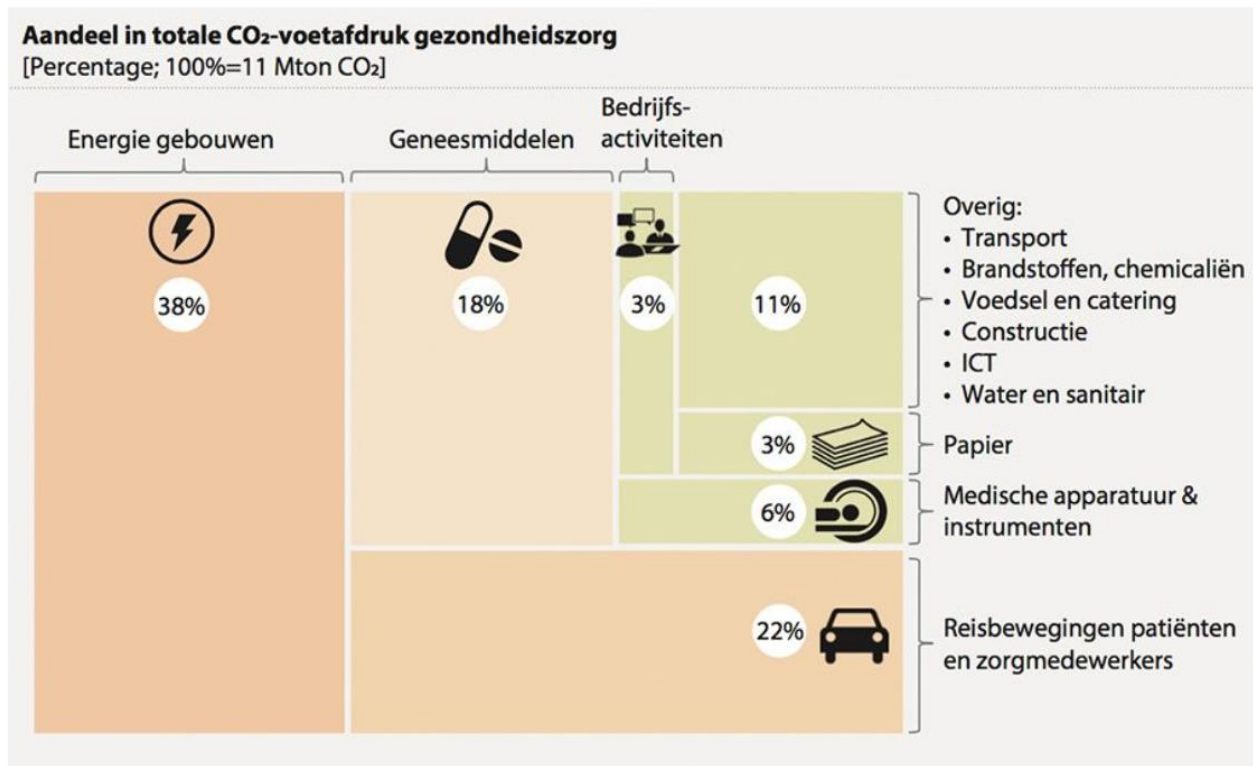


Figure 1: Gupta (2019)

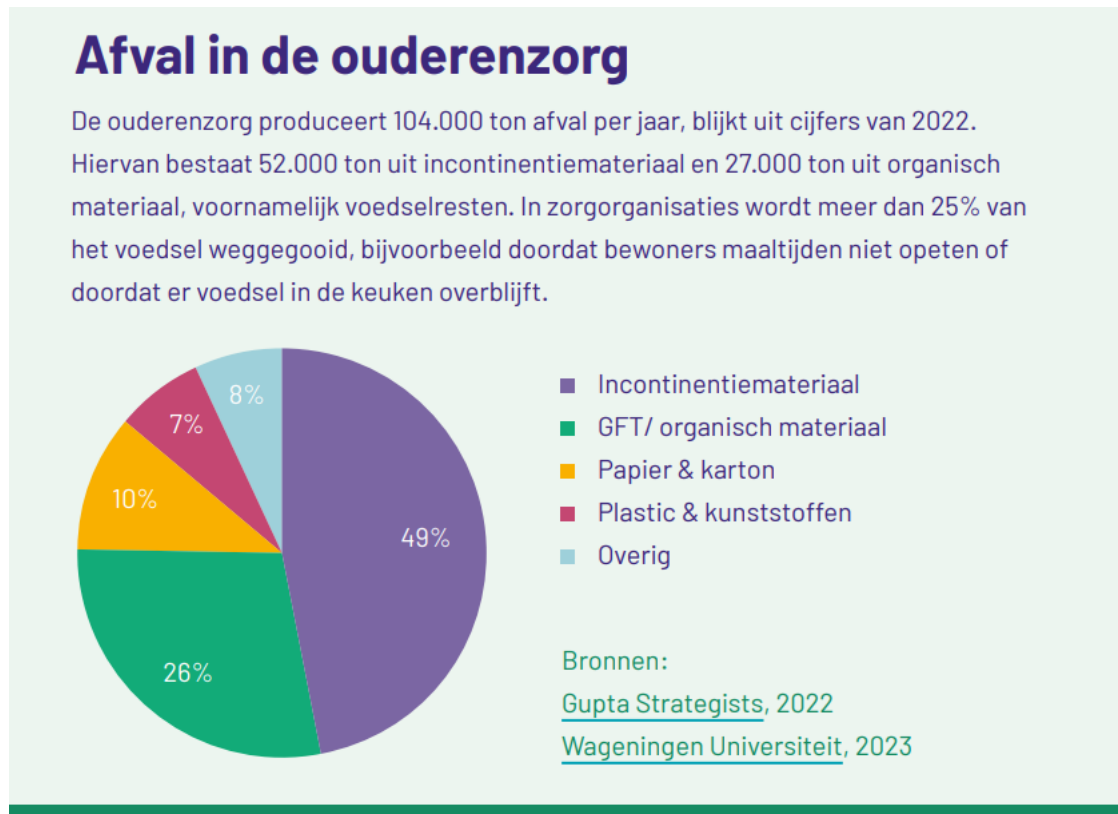
The World Health Organization (WHO) considers the climate crisis to be the greatest threat to public health of this century ([WHO's 10 calls for climate action to assure sustained recovery from COVID-19](#)). This crisis also has direct consequences for healthcare: climate change leads to new health problems, including in the Netherlands, such as an increase in infectious diseases that were previously uncommon. It is becoming increasingly clear that a healthy lifestyle is impossible on an unhealthy planet. Without change,

the healthcare of today creates the patients of tomorrow. Therefore, the UMCG aims to be fully circular and climate-neutral by 2035 ([Sustainability in the UMCG](#)).

The healthcare sector consumes many raw materials that may eventually be depleted. Therefore, it is important to work in a circular way. This means using resources responsibly and sparingly, and where possible, making a shift from 'disposables' to 'reuse'. The goal is to keep resources within the chain and reuse them.

From the Green Deal 3.0, the healthcare sector aligns with the national policy of reducing primary raw material consumption by 50% and minimizing residual waste by 75% by 2030 ([Netherlands Circular by 2050 | Circular Economy | rijksoverheid.nl](#)). This will be achieved by reducing resource waste, using more sustainable products, and better separating waste when it does occur.

In the care of vulnerable patients, much waste is generated, primarily through the use of medical disposables—single-use products. Using reusable materials can reduce the amount of medical waste, lower costs, and increase awareness of material usage. However, this policy must take into account key values such as patient safety, the workload on healthcare staff, and manageable costs.



Medication contributes to the quality of life for many elderly and chronically ill individuals. However, medication use also has a downside. The production and use of medication have a significant impact on the environment. For instance, medication residues end up in groundwater and surface water either indirectly through urine and faeces or directly by flushing unused medication down the toilet or sink. Therefore, it is important to reduce the environmental impact of medication use.

Extra (optional):

- **Artist Maria Koijck** uniquely visualizes the amount of plastic waste produced within UMCG, for example during her breast cancer surgery. Watch the video: <https://youtu.be/w28M7wjlr6E>
- **E-module Planetary Health**
The **Planetary Health** e-module (60 minutes) has been developed for (future) healthcare, research, and education professionals working or studying in University Medical Centers who want to learn more about Planetary Health and its relationship with healthcare.
The e-module provides insight into the concept of Planetary Health and answers important questions, such as:
 1. What is Planetary Health and what does it mean for healthcare?
 2. Why are equality and justice important for sustainable healthcare?
 3. What can you do as a (future) healthcare professional? And what can we achieve together as a healthcare system?

You can access the e-learning via [this link](#) (create a free and voluntary account and select the 'planetary health' e-learning).

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Appendix 4 – Scorpion form

B1 2.01a PD CARE CLERKSHIP
<p>Attachment: Report care clerkship (include clerkship plan)</p> <p>General:</p> <p>The internship supervisor provides feedback and a grade for the competency domains: professionalism, leadership and communication.</p> <p>COMPETENCY DOMAIN PROFESSIONALISM</p> <p>De student:</p> <ul style="list-style-type: none"> - shows enthusiasm - is critical of their own actions and functioning - is reliable and keeps promises - is present all days of the internship - maintains a neat appearance - 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
Feedback
<p>What is going well?</p>
<p>What could be improved?</p>
<p>COMPETENCY DOMAIN LEADERSHIP</p> <p>The student:</p> <ul style="list-style-type: none"> - 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 - initiates and is respectful and correct in their interview with a patient or client
Feedback
<p>What is going well?</p>
<p>What could be improved?</p>
<p>COMPETENCY DOMAIN COMMUNICATION</p> <p>The student:</p> <ul style="list-style-type: none"> - communicates openly with patient, client and colleague - is receptive to the stories of patient, client and colleague - is polite and respectful to patient, client and colleague

- shows empathy to patient, client and colleague
- adjusts their communication skills to the specific situation of the conversation partner
- shows understanding and attention for the feelings of patients, clients and colleagues

Feedback

What is going well?

What could be improved?

Internship report corresponds to reality:

0 yes

0 no

Explanation

Assessment

The supervisor grades the student on, and provides feedback for, the competency domains on the basis of their internship.

Rubric grades competency domains:

4	5	6	7	8	9	10
Student functions heavily below expectations, very worrying	Student functions below expectations, cause for concern	Student functions below expectations, but just enough	Student functions as expected	Student functions beyond expectations	Student functions strongly beyond expectations	Student functions brilliantly, exceptionally

Grade PROFESSIONALISM

Grade LEADERSHIP

Grade COMMUNICATION