

## Supervised Learning Events for F2 doctors in Public Health placements

There has been concern in some areas of the Foundation Programme that F2 doctors are unlikely to obtain any SLEs while working in Public Health (PH). To demonstrate that a variety of SLEs are available, PH consultant colleagues across the East Midlands have contributed to the list below. This is intended to support Foundation Programme teams and educational supervisors in hospital settings, so that they can reassure the F2 doctors about the range of options available in PH settings.

Not all the examples will be available in all PH placements. The health protection items are only available for placements with Public Health England. Some PH placements include one session a week of clinical work, such as GP work in a specialised setting or a smoking cessation clinic, making patient related mini-CEX more accessible. However, most pieces of work that have been undertaken in Public Health can be the basis of case-based discussions. It is helpful to use knowledge, skills and attitudes as a framework to discuss public health issues e.g. equity, autonomy, population focus.

Supervised Learning Event	Public Health Example
Case based discussion (CBD)	<ol style="list-style-type: none"> <li>1. Public Health management of infectious disease, highlighting the different Public Health and clinical actions, roles and responsibilities</li> <li>2. Development of commissioning specifications and policies</li> <li>3. The Individual Funding Request process, including identifying the evidence base and discussion at the IFR Panels</li> <li>4. Discussions after attendance at key meetings or public stakeholder events.</li> <li>5. Discussion in relation to community development work</li> <li>6. Supporting the briefing of Councillors, including reflection on the setting, culture and required knowledge base.</li> <li>7. Public health role in Child Death Overview</li> </ol>

	Panel
Mini clinical examination	Examining patients at a TB clinic Interviewing a patient to administer a questionnaire using a CO Monitor
Directly Observed Procedures	<ul style="list-style-type: none"> <li>• <b>A Health Protection</b> <ol style="list-style-type: none"> <li>1. Undertaking Mantoux tests in a TB clinic</li> <li>2. Taking swabs or other samples in relation to an outbreak of infectious disease</li> <li>3. Explaining prophylaxis, e.g. for meningococcal disease to a contact</li> <li>4. Handover of a health protection incident</li> <li>5. Health screening, e.g. for TB</li> </ol> </li> <li>• <b>B Generic Public Health</b> <ol style="list-style-type: none"> <li>6. Chairing a group, e.g. Journal club, clinical discussion</li> <li>7. Consider observed presentation of analytical tasks as procedures</li> <li>8. Observed interaction with external colleagues, voluntary sector agencies</li> <li>9. IFR - presenting the evidence to an IFR Panel meeting</li> <li>10. Undertaking health checks in primary care</li> </ol> </li> </ul>
Developing the clinical teacher	<ol style="list-style-type: none"> <li>1. Presenting audit at departmental meeting</li> <li>2. Presentation of project work while in PH department, e.g. at clinical network meetings</li> <li>3. Presentations at conferences</li> <li>4. Leading a Journal Club presentation</li> <li>5. Presentation back to fellow trainees about skills obtained during placement</li> <li>6. Developing teaching materials</li> <li>7. Presentations at network teaching</li> </ol>

In addition to the SLEs available, there is often the opportunity to carry out an audit. Examples include: take up of Calcium and Vitamin D for ambulant patients in care homes; use of the GPCOG as a screening test for dementia in a prison setting; stage of pregnancy at hospital booking in a population.

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