



17th March 2020  
Queensland Medical Students' Council  
46 Oxford Terrace, Taringa  
QLD 4068

## **COVID-19 and Queensland Medical Students in the medical workforce**

The Queensland Medical Students' Council (QLDMSC) is the peak representative body for over 4000 medical students at the four medical schools across Queensland. Our members are diverse, coming from both postgraduate and undergraduate medical programs at the University of Queensland, Griffith University, and Bond University in the South-East of Queensland, as well as James Cook University in the North. QLDMSC is committed to working with Queensland Health, Queensland Medical Schools, and other stakeholders to protect the health of students, patients, and healthcare workers during the current outbreak of the 2019 coronavirus disease (COVID-19).

QLDMSC recognises the critical role that medical students may play in the unfolding response to COVID-19 and affirm that Queensland medical students have a strong desire to assist and contribute over the coming months. However, in any response, our primary consideration is always our students' welfare and safety, and that of our patients. Our priority throughout this crisis is to ensure that appropriate precautions are taken to protect the health and rights of medical students and to ensure students are working within their scope of practice to ensure patient safety at all times.

QLDMSC strongly believes that medical student education should be privileged and protected, and should not be utilised as a method to fill workforce shortages. However, in the case that medical students should need to form a part of the medical workforce, any response should uphold the following key principles, to prioritise the wellbeing of Queensland medical students and to maintain patient safety.

QLDMSC believes that any Queensland medical student who is recruited to be a part of the COVID-19 response should be:

1. Recruited on a voluntary, opt-in basis
2. Remunerated appropriately for their labour and increased personal risk
3. Provided with appropriate workplace protections including temporary registration, sick leave, safe working hours, overtime, indemnity, WorkCover and other industrial protections
4. Be exempt from having this work necessarily contribute to their academic progression and accreditation, in the first instance
5. Have access to appropriate PPE and training, including specific guidance for PPE use and COVID-19 protocols should this involved clinical work
6. Have access to safe levels of supervision and support
7. Involved in the workforce for the shortest time possible
8. Able to opt out at any time

QLDMSC understands that in rural hospitals, Queensland medical students are already being called to assist with triage in ED, and over the coming months final year medical students may be called to

assist with acute workforce shortages that develop as medical practitioners become ill or require self-isolation or quarantine.

QLDMSC vehemently opposes the use of medical students to fill acute workforce shortages as means of fulfilling placements or electives in the first instance. Medical students are held on the lowest rung of the medical hierarchy and are particularly vulnerable to exploitation and coercion. Should the involvement of medical students be facilitated in such a way that work performed would necessarily contribute to academic progression, QLDMSC believes students would feel unduly pressured and coerced into contributing, despite the potential increased risks to themselves and to their families and friends. This could potentially see students acting outside of their scope of practice, which poses risks not only to themselves but also to the patients they are treating.

QLDMSC believes any placement that is reduced or cancelled should be replaced with an equivalent learning opportunity that is provided online or at a separate time point. However, should a student be required participate in the medical workforce in a capacity that is deemed to be in a closely adjunct to their normal scope of practice (ie. supervised assisting in fever clinics), there should be a recognition of the learning and contribution to their professional development that is reflected in their accreditation.

QLDMSC strongly believes any system where students would assist in the COVID-19 response should be a voluntary, opt-in system, with associated industrial relations protections to ensure they are able to access appropriate sick leave in the case of contracting COVID-19 or any associated quarantine periods, overtime, breaks, supervision, training, and health and safety protections. QLDMSC believes students should be involved for the least amount of time possible, and also have the right to opt out at any time, should they feel that they are no longer able to undertake work for whatever reason.

QLDMSC believes that any position to be filled by a medical student in the COVID-19 response should be remunerated appropriately, on the basis that if any other member of the health workforce was called to fulfil the equivalent duties, they would be compensated for their work. Such remuneration is consistent with the responses of other states and private entities. In Victoria, the Western Health network has already sent a callout to Western MD2-4s to aid in the COVID-19 Assessment Clinic at Sunshine Hospital, which will be a paid role. Expected duties involve conducting a basic clinical assessment and testing for COVID-19 if the patient meets pre-defined criteria. Meanwhile, SA Health have recruited nine final year students for contact tracing and answering questions over the phone - this is paid work and involves no contact with patients. Medibank is also recruiting medical students to staff their hotlines, who are also remunerated for their contributions.

In conclusion, QLDMSC strongly believes that medical education should be respected and not utilised as a method for addressing workforce shortages. However, in the extenuating circumstance that this should become necessary, QLDMSC believes that students may contribute provided that it is a voluntary, opt-in system that does not necessarily contribute to academic progression and includes appropriate supervision, training, remuneration, and other industrial protections.

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