Hull York Medical School

Peer Physical Examination Policy and Procedure for Gateway, MB BS and Physician Associate Programmes

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<td>Board of Studies</td>
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<td>To be implemented from:</td>
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<td>Responsibility to update:</td>
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</table>

To obtain this Code of Practice in an alternative format please contact governance@hyms.ac.uk
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Abbreviations
HYMS Hull York Medical School
Clinician student Student who is performing the physical examination on a fellow student
Patient student Student who is being examined by the clinician student
Observing student Student who is observing the clinician student examine the patient student to be able to give specific, descriptive and non-judgemental feedback
Clinical skills tutor Clinically trained member of faculty responsible for tutoring clinical skills sessions
PA Physician’s Associate
1. **Context**

1.1. The Hull York Medical School is committed to providing an inclusive and supportive environment for all students, staff and partners (Hull York Medical School Mission statement).

1.2. As students on the Gateway, MB BS and PA programmes you are studying for both a university degree and a professional qualification.

1.3. You are therefore expected to comply with University, General Medical Council and other national guidelines regarding conduct (as there is currently no regulatory body for Physician’s Assistants the General Medical Council have been used as the guiding regulatory body).

1.4. The following have been used in preparing this policy and procedure document:

   1.4.1. General Medical Council Achieving Good Medical Practice: Guidance for medical students (2016)
   1.4.2. General Medical Council Promoting Excellence: Standards for medical education and training (2016)
   1.4.3. General Medical Council Medical Students: Professional values and fitness to practise (2016)

1.5. The following are particularly noted as having informed this document:


   S1.1 The learning environment is safe for patients and supportive for learners and educators. The culture is caring, compassionate and provides a good standard of care and experience for patients, carers and families.

   R2.3 Organisations must consider the impact on learners of policies, systems or processes. They must take account of the views of learners, educators and, where appropriate, patients, the public, and employers. This is particularly important when services are being redesigned

   1.5.2. General Medical Council Promoting excellence: Equality and Diversity Considerations (2017)

   Organisations
   - should seek to respond appropriately to the equality and diversity and fairness issues that relate to the standards and requirements set out in Promoting excellence
   - should consult and involve groups of people who share protected characteristics in developing their activities whenever it would be appropriate and relevant to do so.
2. **Purpose**

2.1. It is an absolute requirement of the MBBS and PA programmes that you undertake the examination of all patients, whatever their personal, social, religious, cultural, or individual characteristics, with confidence and in a professional manner to develop competence in these examinations as required by the General Medical Council.

2.2. Peer Physical Examination is an educational method used in many medical schools in the UK and abroad to improve clinical skills training. The benefits of Peer Physical Examination are clearly detailed and supported in the existing medical education literature (see citations below).

2.3. This Policy has been written to:

   2.3.1. Explain the benefits of peer physical examination to students, clinical skills tutors, and faculty

   2.3.2. To clarify the expectations of each student and each member of staff participating in peer physical examination sessions

   2.3.3. To foster an understanding and culture of respect between all individuals participating in peer physical examination sessions allowing all students to contribute to these sessions

   2.3.4. To provide a framework for any, and all, learning opportunities involving peer physical examination undertaken by HYMS students

   2.3.5. To provide clear procedures for the clinician student, patient student and clinical skills tutors if an unexpected event should arise.

2.4. This policy is intended to be shared with students at the point of entry onto the Gateway, MB BS and PA programmes but is also applicable to students already registered onto these programmes and to all staff supervising peer physical examination teaching sessions.

3. **Benefits of peer physical examination**

3.1. It is a requirement of the MBBS (including Gateway) and PA programmes that you acquire the knowledge, skills and professional behaviours required to become a doctor/physician’s associate. This includes becoming competent in a wide range of clinical skills, which includes being able to undertake physical examinations on patients.

3.2. At the Hull York Medical School, you begin learning how to undertake physical examinations in Year One which enables you to apply your knowledge and learn about physical examinations with deep understanding.

3.3. Like many other UK medical schools, you will acquire physical examination skills by undertaking peer physical examination and there is much evidence suggesting that peer physical examination is a very beneficial educational tool. This document has been produced in line with recommendations in the medical literature (Koehler and McMenamin (2014), Koehler, Curry et al (2014) and Singh et al (2020)).
3.4. Many benefits have been identified by both existing students and Hull York Medical School faculty. These include:

3.4.1. Participating in peer physical examination sessions helps you appreciate the patient perspective – what it feels like to be physically examined, the importance of clear communication and instructions to a patient throughout an examination and how a patient can feel embarrassed / vulnerable and should be exposed for the minimum time possible.

3.4.2. Enabling you to receive feedback on your physical examination skills – from your fellow students, your clinician tutor and crucially the patient student who can give feedback in a way that real patients/healthy volunteers cannot.

3.4.3. Enabling you to improve your technique by practising the same examination multiple times which is often not possible with real patients who are ill/tired.

3.4.4. Enabling you to develop confidence and skill in a safe environment examining your peers before going out onto clinical placement and examining real patients.

3.4.5. Learning to undertake a physical examination on peers, in a safe environment with feedback from your clinical skills (clinician) tutor makes it much less daunting examining a real patient on clinical placement.

3.4.6. Fostering a culture of respect and understanding of appropriate professional behaviours - including obtaining consent.

3.4.7. Enabling you to study normal anatomy and appreciate what a normal physical examination is like on many different subjects rather than just learning on patients.

3.4.8. Providing an increased opportunity to practice physical examinations in a system where hospital patients have shorter stays and are often too unwell to be examined by junior medical students.

4. General information on the practicalities and expectations for students participating in peer physical examination sessions

4.1. Peer physical examination is an important educational tool – and will be used in clinical skills sessions and as part of self-directed learning. Although the former will be supervised by a clinical skills tutor, but the latter will not, it is imperative that the behaviour of all participants must be professional.

4.2. From the studies looking at students’ attitudes to peer physical examination, we know that a number of factors including age, gender, ethnicity, cultural and religious beliefs and personal experiences mean that some students can be more anxious about participating in peer physical examination sessions than others. At Hull York Medical School, we value the diversity of our student population and are committed to supporting all our students so that they can participate in peer physical examination sessions in a way which is acceptable to them as individuals.

4.3. The General Medical Council requires competence in undertaking physical examinations. If you are not able to approach the physical examination of a patient with confidence, and if your approach does not put the patient at ease, you may not
obtain the level of competence required of you. Hospital inpatients tend to be ‘sicker’ and have shorter hospital stays than previously, meaning that the opportunities to examine them are more limited than in the recent past. Peer physical examination provides an important alternative opportunity for you to develop confidence and competency in basic physical examination skills. In order to balance individual preferences regarding their level of participation in peer physical examination with ensuring that all students have an opportunity to practice their skills, HYMS asks and expects that all students treat each other with respect and dignity.

5. **Details of what you can expect as a student**

5.1. As a student you will be allocated to a clinical skills group and will work with the same group of students and, where possible, have the same (clinician) clinical skills tutor for an entire academic year.

5.2. It is normal to feel some anxiety ahead of your first clinical skills sessions and you will have the opportunity to discuss any anxieties with your clinical skills tutor.

5.3. It is imperative that you appreciate that a peer physical examination session is a ‘clinical’ environment and you must behave in the same professional manner as you would on clinical placement and show the same respect to your peers as you would to patients.

5.4. You will be asked to participate in peer physical examination as the ‘clinician’ student who undertakes the physical examination; as the ‘patient’ student who is examined and as the ‘observing’ student who provides feedback to the ‘clinician’ student. To maximise your learning, you should rotate through these roles in clinical skills sessions.

5.5. We understand that you may feel anxious about these sessions and you will be supported by your Clinical Skills Tutor with whom you will have the opportunity to discuss any concerns about participation in peer physical examination activity as you settle into these sessions. You should not feel pressurised into being examined.

5.6. You will be advised of the appropriate clothing to bring to peer physical examination sessions and you must ensure that you bring the appropriate clothing to change into ahead of the session.

6. **Details of what is expected of you as a student**

6.1. You must accord the same respect to your fellow students during peer physical examination as you would to real patients in a clinical environment. You must respect the modesty of the patient student and ensure that you gain verbal consent prior to every physical examination, exactly as you would with real patients.

6.2. You must always ensure that exposure of the patient student should be restricted to the relevant body part, for the shortest time possible, thus ensuring the comfort and dignity of the patient student exactly as would be the case with a real patient.

6.3. You must behave in a professional manner and abide by the agreed ground rules of the group.

6.4. We appreciate that students often feel anxious about peer physical examinations and you will have the opportunity to discuss any anxieties with, and be supported by, your
clinical skills tutor. If any specific peer physical examination activity is unacceptable to you as the ‘patient student’ then you should discuss this with your tutor. You may find it more acceptable to work with a peer of the same gender or for the physical examination to take place behind a screen for example. If suggested adjustments are unacceptable then for a specific physical examination, you could act as the ‘observing’ or ‘clinician’ student.

6.5. You must respect the decisions of any of your peers regarding specific physical examinations for which they decline to be examined (the reasons for which might not be obvious to you).

6.6. You should discuss discreetly with your tutor if you feel that other students’ unwillingness to be examined is affecting your own learning.

6.7. You must sign and agree to abide by the behaviours detailed in the student written agreement (see Appendix 1)

7. **Provision to ensure that learning is not compromised amongst non-participants**

7.1. It is important to remember that whilst participation in individual peer physical examination sessions should be at the level of your own comfort: it is an absolute requirement of the MBBS and PA programmes that you undertake the examination of all patients, whatever their personal, social, religious, cultural or individual characteristics, with confidence and in a professional manner to develop competence in these examinations as required by the General Medical Council.

7.2. Peer physical examination sessions involve undertaking physical examinations in a ‘clinical’ and not a social setting. Students must treat each other with the same respect and dignity and demonstrate the same professional behaviours as if they were examining real patients.

7.3. If you are uncomfortable with a specific physical examination as a ‘patient student’, you should discuss your anxieties with your clinical skills tutor and you could request to work with a student of the same gender, or the examination take place behind a screen for example. If suggested adjustments are unacceptable then for a specific physical examination, you could act as the ‘observing’ or ‘clinician’ student.

7.4. It is important you appreciate that a key component of acquiring physical examination skills is being observed by a tutor to receive feedback on your examination technique.

8. **Clinical Skills tutors as ‘patients’/’models’**

8.1. This has been discussed extensively in consultation with existing tutors and students.

8.2. Clinical Skills tutors are all trained clinicians and their role is to demonstrate a physical examination at the beginning of a session, and then to provide ongoing feedback to all students in a clinical skills group to increase student competence and confidence with examinations.

8.3. It is Hull York Medical School policy that Clinical Skills tutors should not offer themselves to be examined.
9. **Unexpected issues arising during peer physical examination**

9.1. There are many benefits to peer physical examination identified in the literature and by students, clinical skills tutors and faculty at the Hull York Medical School.

9.2. It is rare that unexpected incidents have arisen, but important that there are clear procedures to help you as students, clinical skills tutors and faculty manage these.

9.3. There are procedures for:

9.3.1. The discovery of a ‘possible physical / clinical abnormality’ or circumstance requiring further investigation

   *This might include a clinician student hearing a heart murmur when examining a ‘patient’ student.*

9.3.2. Any student behaving unprofessionally during a peer physical examination session

   *This might include breaking confidentiality or discussing a fellow student’s medical history/examination findings outside the clinical skills session (e.g. that the student has had major cardiac surgery about which students are only aware of due to attending a peer physical examination session)*

9.3.3. Any clinical skills tutor behaving unprofessionally during a peer physical examination session.

   *Clinical skills tutor are all trained clinicians. If you had any concerns regarding unprofessional behaviour of your tutor you should discuss this with the Director of Problem Based Learning / Phase 1 Academic Lead.*

9.4. These procedures are detailed in the next section of this document.

10. **Student written conduct agreement**

10.1. All students are expected to sign the student written conduct agreement to confirm that they have read and understood the important information included in the HYMS Peer Physical Examination Policy and Procedure.

10.2. The student written conduct agreement is included in Appendix 1 of this document.

11. **Procedure to be followed by Clinical Skills Tutor in the event of unprofessional behaviour**

11.1. As discussed previously, it is expected that, during peer physical examination sessions, students behave professionally and accord each other the same respect as they would to real patients.

11.2. Any concerns regarding unprofessional behaviour or conduct will be reported Student Support ([student.support@hyms.ac.uk](mailto:student.support@hyms.ac.uk)) using the Expression of Concern form (see
appendix 2). All Expressions of Concern will be reviewed and managed according to established processes in the School.

12. **The discovery of a possible physical / clinical abnormality requiring further investigation**

12.1. Please see the procedure flow chart on the next page of this document.

12.2. In the event of a ‘possible physical / clinical abnormality’ being discovered by a clinician student in a patient student (e.g. a heart murmur, or a suspicious looking mole), the clinician student should discuss this with the clinical skills tutor.

12.3. The clinical skills tutor will ask consent to examine the patient student and if the patient student consents to the examination and if the presence of a ‘possible abnormality’ is confirmed then the patient student will be advised to arrange an appointment with their GP if deemed necessary. This appointment would usually be routine – and the clinical skills tutor would advise if this needed to be urgent (e.g. very high blood pressure/suspicious looking mole). If, when the clinical skills tutor examines the patient student, no abnormality is confirmed, then feedback is given on examination technique and no further action is necessary.

12.4. If the patient student declines examination by the clinical skills tutor, then the patient student would be advised to attend their own GP for further assessment.

12.5. The clinical skills tutor should complete a Notification of the discovery of a ‘possible physical / clinical abnormality or circumstance’ letter and give this to the student to take to their own GP (see Appendix 3 for the form).

12.6. Please note that all students are expected to be registered with a General Practitioner as physical examinations during a clinical skills session must not be viewed as, and are not, clinical care.
12.7. Procedure flow chart:

Discovery of a ‘possible abnormality’ or circumstance requiring further investigation

- Clinician student detects ‘possible abnormality’ during PPE

  - ‘Possible abnormality’ known to patient student
    (Discussed with clinical skills tutor but not with the rest of the group without patient student consent)

  - ‘Possible abnormality’ not known to patient student
    Clinical skills tutor informed and asks consent to examine patient student.
    Patient student declines. Clinical skills tutor advises patient student to attend their GP for assessment.
    Not discussed with the rest of the clinical skills group without patient student consent.

  - ‘Possible abnormality’ not known to the patient student.
    Clinical skills tutor informed and asks consent to examine the patient student.
    Patient student consents.
    Clinical skills tutor confirms ‘possible abnormality’.
    Clinical skills tutor completes notification of ‘possible abnormality’ form and patient student advises to consult own GP.
    Not discussed with the rest of the clinical skills group.
Appendix 1: Hull York Medical School Student Conduct Agreement – Participation in Peer Physical Examination

It is imperative that all students on the Gateway, MB BS and PA programmes at the Hull York Medical School have read and understood the Hull York Medical School Peer Physical Examination Policy and Procedure Policy

Please tick the relevant box:

☐ I declare that I have seen, read and understood the Hull York Medical School Peer Physical Examination Policy and Procedure document (including the sections on discovering a possible physical abnormality and action for unprofessional behaviour)

☐ I have attended the Introduction to Peer Physical Examination clinical skills session where the policy and procedure document was explained to me.

☐ I am aware that this Peer Physical Examination Policy and Procedures policy is available on Blackboard in the Information for all section.

☐ I understand that unprofessional behaviour is not acceptable and that actions will be taken if I demonstrate unprofessional behaviour during a peer physical examination session. An Expression of Concern form will be completed and sent to the Phase Lead (MB BS), Programme Lead (Gateway) or Programme Lead (PA) programme with the potential of a referral to the Case Management Group / Fitness to Practice committee.

<table>
<thead>
<tr>
<th>Student ID number:</th>
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<tr>
<td>Student name</td>
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<td>Student signature</td>
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<td>Date</td>
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If you have a particular reason for not signing this form, then you should discuss this with your clinical skills tutor.

A signed copy of this form will be placed within your student record.

If you have any comments relating to this policy, please contact Dr Anna Hammond, Academic Lead for Clinical Skills & Reasoning (anna.hammond@hyms.ac.uk) or Dr Laura Mongan, Academic Lead Phase I MBBS (laura.mongan@hyms.ac.uk) .
Appendix 2: Expression of Concern regarding a HYMS student

Expression of Concern (HYMS Students)

The Student Support Team are responsible for coordinating Expressions of Concerns in relation to Hull York Medical School students. Any confidential information will be handled sensitively and stored appropriately by the School. Completed paperwork should be submitted student.support@hyms.ac.uk

<table>
<thead>
<tr>
<th>1. Report of the Case</th>
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| **Route of case referral** | [ ] HYMS Staff, please specify:  
[ ] Student  
[ ] University of Hull Staff, please specify:  
[ ] University of York Staff, please specify:  
[ ] Other, please specify:  |
| **Report submitted by** | *(insert name)*  |
| **Contact details (email, telephone number)** |  |
| **Anonymity request** | [ ] Yes  
[ ] No  
Reason, please specify  |
| **Date of case referral** |  |

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<th>2. Student Details</th>
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<tr>
<td><strong>Full name</strong></td>
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<td><strong>Student UCAS/SITS number (if known)</strong></td>
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<td><strong>University of registration</strong></td>
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<td><strong>Programme registered</strong></td>
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<td><strong>Year of Study</strong></td>
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| 3. Nature of Concern |  |
Indicate by ‘x’ to confirm the nature of your concern.

[ ] Inappropriate professional behaviour

[ ] Unauthorised absence or lateness (specify days)

[ ] Evidence of ill-health

[ ] Suspected misuse of alcohol/drugs

[ ] Poor academic performance/engagement

[ ] Other (please give details)

4. Reasons for the concern

Please provide a brief outline of the concern and the circumstances relating to the context in which this student has come to your attention, including any evidence to support the concern. You should be reassured that any confidential information disclosed is handled sensitively and stored appropriately by the School.
You should now send the completed form to the Student Support Team (student.support@hymss.ac.uk)

### 6. Checking by Student Support (Completed by Student Support Office)

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<th>Shared with Phase Lead</th>
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<th>Shared with Governance Coordinator</th>
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### 7. Previous concerns raised (to be completed by the Governance Coordinator)

Please give dates and details of any previous concerns

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### 8. Action by Chair of Case Management Group (CMG)

Notes (only if applicable)

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<th>Name</th>
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Dear General Practitioner,

Student Name

I am grateful to you for reviewing this student because during a recent peer physical examination teaching session at the Hull York Medical School, a possible physical/clinical abnormality was noticed.

The observations were as follows –

I am grateful to you for reviewing this student as their General Practitioner.

With kind regards

Signature

Name (PRINT)

Date
References
General Medical Council (2016) Medical Students: professional values and fitness to practise’ (accessed online 17/11/20 https://www.gmc-uk.org/education/undergraduate/professional behaviour)
Appendix 4: Equality Impact Assessment Peer Physical Examination Policy & Procedure

University of York
Equality Impact Assessment Form

Section 1: Contact details
Please complete your details and contact information in the spaces provided.

<table>
<thead>
<tr>
<th>EIA Author:</th>
<th>Dr Anna Hammond</th>
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<tbody>
<tr>
<td>Partners/decision-makers:</td>
<td>NA</td>
</tr>
<tr>
<td>Job title:</td>
<td>Academic Lead for Clinical Skills &amp; Reasoning</td>
</tr>
<tr>
<td>Faculty/Service Area:</td>
<td>Hull York Medical School</td>
</tr>
<tr>
<td>Email:</td>
<td><a href="mailto:Anna.hammond@hyms.ac.uk">Anna.hammond@hyms.ac.uk</a></td>
</tr>
<tr>
<td>Submission date:</td>
<td>December 2020</td>
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Section 2: About the policy¹
Please describe what you are impact assessing and who it applies to.

<table>
<thead>
<tr>
<th>Title:</th>
<th>Hull York Medical School Peer Physical Examination Policy &amp; Procedure document</th>
</tr>
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</table>
| Aims/description/purpose: | Peer Physical Examination is an educational method used in many medical schools in the UK and abroad to improve clinical skills training. Peer Physical Examination has been used as the approach by which Phase I students acquire physical examination skills for many years. The benefits of Peer Physical Examination are clearly detailed and supported in the existing medical education literature. This policy has been written to  
  - Explain the benefits of peer physical examination to students, clinical skills tutors, and faculty  
  - To clarify the expectations of each student and each member of staff participating in peer physical examination sessions  
  - To foster an understanding and culture of respect between all individuals participating in peer physical examination sessions allowing all students to contribute to these sessions  
  - To provide a framework for any, and all, learning opportunities involving peer physical examination undertaken by HYMS students  
  - To provide clear procedures for the clinician student, patient student and clinical skills tutors if an unexpected event should arise. |
| People it applies to: | ✓ Staff ✓ Students ☐ Visitors ☐ General public |

Section 3: Gathering data and evidence
Have you identified relevant evidence (qualitative and quantitative) to establish whether this policy could potentially affect some equality groups more than others?

¹ ‘Policy’ refers here to policies, procedures and practices – see guidance notes.
Section 4: Assessing the impact
Based on your evidence, which equality groups might this policy affect more or less than others (if any)?

<table>
<thead>
<tr>
<th>Group</th>
<th>Impact</th>
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<tbody>
<tr>
<td>Age</td>
<td>✓</td>
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<tr>
<td>Race</td>
<td>✓</td>
</tr>
<tr>
<td>Disability</td>
<td>✓</td>
</tr>
<tr>
<td>Religion and belief (including no belief)</td>
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<tr>
<td>Gender reassignment</td>
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<tr>
<td>Gender</td>
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<tr>
<td>Marriage and civil partnership</td>
<td>No</td>
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<tr>
<td>Sexual orientation</td>
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<tr>
<td>Pregnancy and maternity</td>
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<tr>
<td>Caring responsibilities</td>
<td>No</td>
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Using examples from the evidence you have collected, please describe the impact (positive, negative or neutral) on the equality groups you have identified above.

**Note:** if you are reviewing a policy/guidance please reflect on the scope, language used and its application - does it fully promote equality and inclusion?

The Peer Physical Examination Policy & Procedure is applicable to all Phase I Students and Phase I Clinical Skills tutors and it is important that the needs of all students and clinical skills tutors have been considered.

The Hull York Medical School is committed to providing an inclusive and supportive environment for all students, staff and partners (Hull York Medical School Mission Statement)

During the development of this policy the following groups of students were considered

- Students with disabilities (discussed at length with Academic Lead for Student Support, who additionally has many years of experience as a Year One and Two Clinical Skills Tutor)
- Students from different backgrounds (discussed with a Female Muslim Clinical Skills Tutor and Student Reps were from diverse backgrounds)
- Students of diverse ages (Student Reps who were a mixture of school leavers and postgraduates)
- Students of both sexes (Student Reps were both sexes)

Hull York Medical School fully appreciates that students can feel anxious at the prospect of participating in Peer Physical Examination Sessions and is committed to supporting students as they settle into participating in these sessions.

The Policy & Procedure is being sent for review by the Phase I External Examiners.

Section 5: Addressing any impact: action planning
Please describe any actions you will undertake as a result of undertaking this assessment – include the timescale for each and who is responsible.

<table>
<thead>
<tr>
<th>Action</th>
<th>Timescale</th>
<th>Responsibility</th>
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<tbody>
<tr>
<td>Approval and adoption of Peer Physical Examination Policy &amp; Procedure</td>
<td>XX</td>
<td>Management Board</td>
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<td></td>
<td>Implementation of Peer Physical Examination Policy &amp; Procedure with existing and new Phase I MB BS Students</td>
<td>January 2021 and then annually each September</td>
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<td>---</td>
<td>-------------------------------------------------------------------------------------------------------------</td>
<td>-----------------------------------------------</td>
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<tr>
<td>3.</td>
<td>Implementation of Peer Physical Examination Policy &amp; Procedure with existing and new Gateway students</td>
<td>January 2021 and then annually each September</td>
</tr>
<tr>
<td>4.</td>
<td>Implementation of Peer Physical Examination Policy &amp; Procedure with existing and new PA students</td>
<td>January 2021 Annually each September</td>
</tr>
</tbody>
</table>

**Section 6: Involvement and Consultation**
What involvement/consultation activity has been undertaken or is planned in relation to this policy?

<table>
<thead>
<tr>
<th>Involvement/consultation activity</th>
<th>Results / Feedback</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Clinical Skills Tutors (Gateway Programme)</td>
<td>Supported the policy</td>
</tr>
<tr>
<td>2. Year 1 Clinical Skills Tutors (MB BS Programme)</td>
<td>Supported the policy</td>
</tr>
<tr>
<td></td>
<td>Mixture of very experienced and newer tutors, of a diverse age range, both sexes and diverse backgrounds.</td>
</tr>
<tr>
<td>3. Year 2 Clinical Skills Tutors (MB BS Programme)</td>
<td>Supported the policy</td>
</tr>
<tr>
<td></td>
<td>Mixture of very experienced and newer tutors, of a diverse age range, both sexes and diverse backgrounds.</td>
</tr>
<tr>
<td>4. One to One meeting with Clinical Skills Tutor (Female Muslim)</td>
<td>Supported the policy</td>
</tr>
<tr>
<td>5. Year 1 student Representatives MB BS programme</td>
<td>Supported the policy</td>
</tr>
<tr>
<td>6. Year 2 student Representatives MB BS programme</td>
<td>Supported the policy</td>
</tr>
<tr>
<td>7. Year 3 student Representatives MB BS programme</td>
<td>Supported the policy</td>
</tr>
<tr>
<td>8. Academic Lead for Student Support</td>
<td>Supported the policy</td>
</tr>
<tr>
<td>9. Student Support Manager</td>
<td>Supported the policy</td>
</tr>
</tbody>
</table>

**Section 7: Approval & Publishing**

Signature of EIA author: Anna Hammond  
Date: December 2020