Preparation for and Orientation of the Medical Student to General Practice

Why this matters

The first days of a placement shape everything that follows.

A well-prepared and well oriented student is more likely to feel confident, engaged, and ready to learn. In contrast, a poor start can lead to uncertainty, disengagement, and missed opportunities.

Preparation and orientation are not administrative tasks – they are the foundation of effective supervision.

1. Prepare before the student arrives

A smooth placement begins well before day one.

What to do

- Review:
  - Placement duration and structure
  - University expectations and assessments
  - Learning objectives
- Clarify expectations (professionalism, attendance, communication)
- Ensure practical logistics are ready (room, IT access, timetable where possible)

Why it matters

- Reduces confusion and inefficiency
- Aligns expectations early
- Signals that the student is a valued member of the practice

2. Get to know the student: build the relationship early

Supervision is built on trust, not just good teaching.

What to do

- Set aside protected time on day one (ideally informal e.g. over coffee)
- Explore:
  - Educational and clinical background
  - Previous health experience (they may bring valuable skills)
  - Learning goals and expectations
  - Concerns or anxieties
  - Personal and cultural context (especially if relocating)

Why it matters

- Students who feel known are more engaged
- Allows supervision to be tailored
- Builds psychological safety

Suggested phrases

"Here's what a typical day might look like…"

"Is there anything about your background that would help me support you better?"

3. Orient broadly: practice, discipline, and community

Orientation should go beyond 'where things are' – it should explain how 'general practice works'

a) Orientation to the practice

What to cover

- Who's who (supervision team and roles)
- How to get help
- Consulting rooms and equipment
- Booking systems and workflow
- Practice policies (confidentiality, infection control, safety)

Tip: Use a checklist or practice manual

b) Orientation to the discipline of general practice

What to cover
How general practice differs from hospital medicine:

- Lower acuity, higher uncertainty
- Continuity of care
- Preventive medicine and chronic disease management
- Whole-person, community-based care

Why it matters

- Shapes how students interpret what they see
- Builds respect for primary care
- Enhances learning

Tip: Use the 7C+ framework

c) Orientation to the community
General practice sits within a broader social and cultural context.

What to cover

- Local population and health needs
- Key services (pharmacy, allied health, community organisations)
- Cultural context, including local Aboriginal and/or Torres Strait Islander communities
- Practical supports (especially for relocated students)

Why it matters

- Deepens understanding of patient context
- Supports student wellbeing
- Reinforces the role of the GP beyond the consulting room

4. Engage the whole team: supervision is a team activity

Students learn from everyone in the practice.

What to do

- Introduce the full team early
- Identify teaching opportunities e.g.:
  - Practice manager → general practice as a business
  - Practice nurse → chronic disease care, triage, wound care, immunisations
  - Reception → patient flow and systems
- Brief the team about the student's role and level

Why it matters

- Broadens learning experiences
- Makes supervision more sustainable
- Reflects real-world general practice

Encouraging student reflection

- *"What surprised you about today?"*
- *"What feels different from hospital placements?"*
- *"What are you unsure about?"*

Summary

A strong start doesn't require perfection; it just requires preparation and a genuine welcome.

Does this resource need to be updated? Contact GPSA: P: 03 9607 8590, E: admin@gpsa.org.au, W: gpsa.org.au
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