



# Supervised Clinical Practice Policy

## **Background and Purpose**

Students often enter the Physician Assistant Program with specific expectations and desires regarding the clinical practice experience component of their education. Many students are well acquainted with medical professionals and organizations in the communities in which they reside. Therefore, it is natural for them to suggest potential SCPEs. The purpose of this policy is to articulate the boundaries with which students may participate in the process of establishing supervised clinical practice experiences and define program expectations and processes for advancement to, recruitment of, and evaluation and approval of clinical training sites and preceptors.

## **POLICY STATEMENT**

In compliance with the ARC-PA standards, the University of Charleston Physician Assistant Program (UCPAP):

1. Requires a formal affiliation agreement be established with any clinical site or preceptor involved in providing a supervised clinical practice experience (SCPE) for students enrolled in the program.
2. Does not require students to provide or solicit clinical sites or preceptors and does not require students to coordinate clinical sites and preceptors for program required supervised clinical practice experiences (SCPE).
3. Permits students to submit requests to develop new sites to the Director of Clinical Education, who then determines the appropriateness of developing the site.
4. Coordinates all activities associated with clinical practice experiences including identifying, contacting, initial and ongoing evaluation of the suitability of, and student placement with clinical sites and preceptors.

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## **Requirements for Student Progression to Clinical Phase**

- Successful completion of all didactic courses
- Successful completion of pre-clinical seminar
- Completion and successful passing of random drug screening
- Successful completion of a criminal background investigation
- Proof of updated immunizations, which includes repeat TST (PPD) prior to the start of clinical rotations and annual influenza vaccination
- Successful completion of Basic Life Support (BLS) for Healthcare Providers course with current certification
- Successful completion of Advanced Cardiovascular Life Support (ACLS) course with current certification
- Signed Health Information Release form by student allowing UCPAP to maintain and release the following information to clinical rotation sites: immunizations, TB screening status, drug screening, background check, and BLS/ACLS certification

## **Clinical Rotation Scheduling**

- All students will be scheduled to complete seven mandatory "core" rotations and one elective rotation in order to meet program experiential learning expectations as defined in the SCPE Patient Exposure policy. Rotation length is five (5) weeks. The rotations include:
  1. Family Medicine
  2. Internal Medicine
  3. Emergency Medicine
  4. Pediatrics
  5. Women's Health
  6. Surgery
  7. Psychiatry
  8. Elective

- Rotation assignment to specific preceptors and clinical sites is done by and at the discretion of the Director of Clinical Education subject to approval of the Preceptor/Clinical Site.
- Students are responsible for arranging and financing travel and living accommodations associated with each of their SCPE rotations. This includes having reliable transportation, to include travel from one site to another within the same rotation (i.e. from Physician's office to hospital(s) and return, or from Clinic to Clinic, etc.).
- Students are not allowed to initiate any form of contact with potential preceptors or clinical sites to schedule rotations or to recruit new preceptors or clinical sites.
- In the event a student is rejected by the clinical site due to information obtained from the required criminal background investigation, the rotation will be cancelled. The program cannot guarantee availability of SCPE rotations if the student's personal history/background precludes clinical site participation in these program completion/graduation requirements.

## **Student Orientation to Clinical Experiential Learning Policies:**

- Identification as students in clinical settings:
  1. Students will **ALWAYS** introduce themselves to patients, patient family members and clinical site staff by stating their full name and position/title - *"physician assistant student."*
  2. Students will wear a short white lab coat emblazoned with the University of Charleston Physician Assistant Program logo during all assigned rotation activities unless wearing the coat is inappropriate based upon the activity being performed (e.g. operating room).
  3. Students will wear the University of Charleston Physician Assistant Program student identification name badge whenever they are in a healthcare facility, clinic or physician office in their official capacity as a student of the PA program.
- Dress code: Students will dress and present themselves in a professional and

appropriate manner for the clinical rotation to which they are assigned. Students should discuss the appropriate dress code with the assigned preceptor or clinical site coordinator. In situations where no specific dress code is mandated by the rotation or preceptor, students will dress according to the dress code as defined in the dress code policy.

### **Learning outcomes:**

The program outcomes serve as the culminating learning outcomes that must be demonstrated with formal assessment activities during, or upon completion of, the clinical practice experiences. Each individual rotation has rotation specific learning outcomes that must be satisfactorily demonstrated during, and upon completion of, that rotation. Refer to the SCPE core syllabus and the rotation addenda.

### **Assessment of experiential learning will include the following:**

1. Logging of ALL clinical experiences, including technical skills and patient encounters. Technical skills logging will include preceptor verification of competency when the preceptor determines competency has been fully demonstrated
2. Rotation specific patient care assignments
3. Mid-rotation preceptor evaluation of student
4. End-of-Rotation (EOR) preceptor evaluation of student
5. EOR written examination

### **Monitor Student Progress**

- As defined in the SCPE Core Syllabus and individual rotation addenda, students are required to complete specific rotation course requirements including weekly logging of clinical practice experiences and online submission of rotation related written assignments.
- The Director of Clinical Education (DCE) will be responsible for monitoring student submission/completion of these requirements and progress toward achieving the program defined SCPE experiences and technical skills competencies.
- The designated SCPE preceptor and the DCE will also monitor student conduct and professionalism throughout the rotation. If a preceptor reports issues with student conduct, then the student will need to meet with the DCE to investigate these issues. In the event a preceptor suspects that a student is participating in a rotation under the influence of illicit substances, the UCPAP reserves the

right to remove the student from the rotation, perform an investigation of the matter, and work with its contracted vendor to perform a drug test on the student. Pending the outcome of the investigation and a decision rendered by the program faculty, the student may be returned to the rotation, subject to failure of the rotation, or dismissed from the program.

## **Determine Rotation Grade**

- As defined by program policy, all clinical rotations are graded on a pass/fail system. Refer to the SCPE Core Syllabus and corresponding rotation addenda for details about criteria defining requirements for a passing grade.

## **Clinical Sites**

### **Recruitment**

- With the support of the University of Charleston, the physician assistant program assumes responsibility for the recruitment of clinical sites for the program mandated supervised clinical practice experience component of the curriculum.
- Students will not be required to provide preceptors or clinical sites for the program mandated clinical experiential learning component of the program.
- Students may voluntarily submit to the Director of Clinical Education the name(s) of potential preceptors and/or clinical sites not already affiliated with the UCPAP; however, there is no direct or implied guarantee on the part of the program that the student will be assigned a rotation with any requested preceptor or clinical site including those already affiliated with the program.
- The program retains full authority for determination and assignment of the student's rotation.

### **Program Requirements**

- Meets all program defined expectations for clinical training sites (see evaluation section below)
- Establishes a formal affiliation agreement with the program

## Evaluation

- Initial - evaluation will consist of:
  1. Completion of a clinical site pre-approval form. This form is initiated by the Director of Clinical Education in communication with a prospective clinical site representative.
  2. Validation and verification of the information provided in the clinical site pre-approval form will be completed by the Director of Clinical Education, either in person or remotely via electronic or telephone modalities. Sites must demonstrate sufficient resources (workspace, patient exam rooms, references, support personnel, patient encounters of the designated specialty content) to provide broad experiential learning opportunities in a safe environment in the corresponding clinical practice area for which the physician assistant student will be assigned.
  3. The Director of Clinical Education will review the prospective clinical site information to establish program approval of the site as a suitable site for students to fulfill curriculum mandated SCPE.
  
- Ongoing - evaluation will consist of:
  1. Review of Student Evaluation of the Clinical Site to ensure no ratings of "DISAGREE" (or worse) have been received. In the event a rating of "DISAGREE" has been received, the program will evaluate the reason for the rating to ascertain and document the suitability of continued use of the clinical site.
  2. Review of the number and types of patient encounters students report having at the clinical site to validate the experiential learning meets defined program expectations (see [SCPE Patient Exposure](#) policy).
  3. Review of the numbers and types of technical/clinical skills procedure experiences students report having at the site to verify students are provided opportunities to develop the program defined technical skills defined in the SCPE Core Syllabus.
  4. Concerns with clinical sites based on student evaluations, review of patient encounters, and/or review of clinical procedure experiences will be cause for re-evaluation of clinical site which may include a site visit.

## **Instructional Faculty**

- The UCPAP will designate at least one Instructional Faculty member at each clinical site. For each clinical practice rotation, students will be provided contact information for the designated Clinical Instructional Faculty member (i.e. preceptor) responsible for oversight of the student's clinical practice experience in that rotation.
- Clinical Instructional Faculty are responsible for assessment and supervision of student's progress in achieving learning outcomes while the student is assigned to that clinical site/rotation. Specific responsibilities include assuring:
  1. Student orientation to the site/rotation
  2. Opportunities for active patient care experiences
  3. Completion of the formal mid-rotation and end-of-rotation (EOR) student evaluations

## **Clinical Site Responsibilities**

- Provide student orientation which addresses, at a minimum:
  1. Use and access to local resources including facilities, computers, and internet.
  2. Clinical site patient care practices including identifying which patients students are allowed to see.
  3. Safety issues including exposure to hazardous materials, exposure control, and procedures to be followed in event of exposure.
  4. Access/use of patient health records and medical documentation policies and procedures.
  5. Student's schedule.
- Provide immediate notification to the program if/when:
  1. Student behavior/performance is judged to create risk for the clinical site or its patients.
  2. The site determines it will be unable to provide a previously agreed upon student rotation/clinical experience.

# Preceptors

## Program Requirements

- Health Care Providers: Physicians (MD or DO) and certified physician assistants (PA-C) will primarily be used for preceptorships. Other providers in specialty areas, such as Nurse Practitioners and behavioral health specialists, may be designated as preceptors for student clinical practice in that provider's specialty area in limited capacity.
- Licensure: Providers approved as preceptors must be licensed within the state in which they will be providing SCPE for program students. The program will verify licensure status at the time of initial preceptor evaluation and again when the license is due to expire to assure license renewal if the provider remains an active preceptor for the program.
- Certification: PA preceptors should be NCCPA-certified. Current certification records will be maintained. For PAs who have not maintained NCCPA certification who are working at sites that do not require maintenance of certification for PA practice, initial certification will be verified. The program curriculum committee must review the preceptor application and determine if the preceptor is qualified to provide instruction for the SCPE. Verification that all non-PA and non-physician preceptors hold valid certification that allows them to practice in their area of instruction will be maintained.
- Specialty Certification: Physician preceptors should be ABMS or AOA board certified in the specialty for which they are providing SCPE for program students. Physician assistant preceptors should practice at sites with physicians who are board certified in the specialty for which the physician assistant is providing SCPE for program students. Specialty board certification will be confirmed by the program at the time of initial evaluation of the potential preceptor and again when the certification is due to expire if the provider remains an active preceptor for the program.
- In special circumstances, if a physician preceptor or physician working with a physician assistant preceptor or other licensed health care provider (such as a nurse practitioner) is not board certified in the specialty for which the SCPE is being provided, the program curriculum committee must review the preceptor application and determine if the preceptor is qualified to provide instruction for the SCPE. Consideration will be based on the following: licensed providers with the appropriate advanced degree for care in the specified area of instruction,

experience in the specified area of instruction, and reason why they are not board certified in the specified area of instruction. Final approval will be given by the program curriculum committee.

- Establishment of a formal affiliation agreement when preceptors are in private practice or otherwise act as the agent of the clinical site for purposes of providing student clinical training experience.
- Preceptors become familiar with program defined student clinical experiential learning expectations and learning outcomes.

## Evaluation

- Initial:
  1. Completion of the Preceptor Pre-Approval Form. The Director of Clinical Education is responsible for initiation of this form in communication with or the assistance of the prospective preceptor or his/her designee.
  2. Verification of current licensure in the state in which the preceptor will be providing the SCPE and ABMS or AOA specialty certification.
  3. Clinical site evaluation of the primary practice location as described above in the clinical site evaluation section with emphasis on validating reported clinical practice workload, types and numbers of patients seen, and past student training experience.
  4. The Director of Clinical Education will review the prospective preceptor information to establish program approval of the preceptor as a Clinical Instructional Faculty member for program mandated SCPE.
- Ongoing:
  1. Review of Student Evaluations of the Preceptor to ensure no ratings of "DISAGREE" (or worse) have been received. In the event a rating of "DISAGREE" has been received, the program will evaluate the reason for the rating to ascertain and document the suitability of and/or conditions for continued assignment of students to the provider for SCPE.
  2. Review of the number and types of patient encounters students report

having with the preceptor to validate the experiential learning meets defined program expectations (see [SCPE Patient Exposures](#) policy).

3. Review of the numbers and types of technical/clinical skills procedure experiences students report having at the site to verify students are provided opportunities to develop the program defined technical skills defined in the SCPE Core Syllabus.

## **Preceptor Responsibilities**

- At the beginning of each student's clinical rotation, review the syllabus and learning objectives with the student for that clinical practice experience.
- Provide supervised student access to patients for direct patient care and clinical skills/procedural experiences.
- Verify student achievement of technical skills competency if demonstrated during the rotation.
- Perform a mid-rotation student evaluation to provide the student with feedback concerning their performance to that point and review progress toward fulfilling their rotation goals.
- Complete the end-of-rotation Preceptor Evaluation of the Student/Program including information about the student's preparedness for the SCPE and any recommendations for program change/improvement or curriculum content.

## **Faculty Development**

- Initial:
  1. All preceptors will be provided with electronic or printed copies of the program's Preceptor Handbook, SCPE Core Syllabus and rotation specific syllabus addendum to orient them to program curriculum and instructional design, student clinical practice experience expectations and defined learning outcomes.
  2. Copies of required documentation related to the student rotation will be provided for review/discussion.
- Ongoing:

1. Select Clinical Instructional Faculty/Preceptors will be invited to participate in the program's Community Advisory Board for the purpose of soliciting their interests and recommendations in on-going program self-assessment and improvement.
2. As ideas or suggestions for improvement of clinical practice experiential learning are identified, the Director of Clinical Education will distribute the information to all Clinical Instructional Faculty/Preceptors.
3. When student evaluations of a preceptor identify a specific need for improvement, the Director of Clinical Education will work with the individual preceptor to create an individualized faculty development plan to address that need.

## Documentation

Record keeping processes for the aforementioned documents/forms is described in the [Program Files Policy](#).

## **ARC-PA Associated Standards:**

- **A1.01** When more than one institution is involved in the provision of academic and/or clinical education, responsibilities of the respective institutions for instruction and supervision of students must be clearly described and documented in a manner signifying agreement by the involved institutions. Signed affiliation agreement(s) must define the responsibilities of each party related to the educational program for students, must specify whose policies govern, and must document student access to educational resources and clinical experiences. While one agreement between the sponsoring institution and each clinical entity to cover multiple professional disciplines is acceptable, these agreements are expected to include specific notations acknowledging the terms of participation between the PA program and each clinical entity. Agreements are expected to be signed by an authorized individual(s) of each participating entity.

- **A1.02** The sponsoring institution is responsible for:
  - g) documenting appropriate security and personal safety measures for PA students and faculty in all locations where instruction occurs
- **A1.10** The sponsoring institution must support the program in:
  - a) securing clinical sites and preceptors sufficient in number to allow all students to meet the program’s learning outcomes for supervised clinical practice experiences and
  - b) ensuring all required rotations are located within the United States.
- **A2.16** The program must:
  - a) verify and document that all instructional faculty actively serving as supervised clinical practice experience preceptors hold a valid license that allows them to practice at the clinical site,
  - b) verify and document all instructional faculty actively serving as supervised clinical practice experience preceptors hold valid certification that allows them to practice in the area of instruction, and
  - c) orient all instructional faculty to the specific learning outcomes it requires of students.
- **A2.17** In each location to which a student is assigned for didactic instruction or supervised clinical practice experiences, the program must inform the student which principal or instructional faculty member is designated by the program to assess and supervise the student's progress in achieving the learning outcomes it requires of students and how to contact this faculty member.
- **A3.03** The program must define, publish, make readily available and consistently apply a policy for prospective and enrolled students that they must not be required to provide or solicit clinical sites or preceptors.
- **A3.06** The program must define, publish, make readily available and consistently apply a policy that PA students must be clearly identified in the clinical setting to distinguish them from other health profession students and practitioners.
- **B3.03** Supervised clinical practice experiences must enable all students to meet the program’s learning outcomes:
  - a) for preventive, emergent, acute, and chronic patient encounters,
  - b) across the life span, to include infants, children, adolescents, adults,

and the elderly,

c) for women's health (to include prenatal and gynecologic care),

d) for conditions requiring surgical management, including pre-operative, intra-operative, postoperative care, and

e) for behavioral and mental health conditions.

- **B3.05** Instructional faculty for the supervised clinical practice portion of the educational program must consist primarily of practicing physicians and PAs.
- **B3.06** Supervised clinical practice experiences should occur with:
  - a) physicians who are specialty board certified in their area of instruction,
  - b) PAs teamed with physicians who are specialty board certified in their area of instruction or
  - c) other licensed health care providers experienced in their area of instruction.
- **B3.07** Supervised clinical practice experiences must occur with preceptors who enable students to meet program defined learning outcomes for:
  - a) family medicine,
  - b) emergency medicine,
  - c) internal medicine,
  - d) surgery,
  - e) pediatrics,
  - f) women's health including prenatal and gynecologic care, and
  - g) behavioral and mental health care
- **C2.01** The program must define and maintain effective processes and document the initial and ongoing evaluation of all sites and preceptors used for supervised clinical practice experiences, to ensure students are able to fulfill program learning outcomes with access to:
  - a) physical facilities,
  - b) patient populations, and
  - c) supervision.