CLINICAL SUPERVISION OF MEDICAL STUDENTS

Purpose

The purpose of this University of Nebraska College of Medicine (UNCOM) policy and procedure is to define the expectations for supervision of medical students on clinical services in the curriculum of the College of Medicine.

Policy

General: Medical students should be provided with appropriate levels of supervision as they progress through their education towards a career in patient care. A supervising preceptor will ensure that medical students are provided with opportunities to learn that are progressive and commensurate with the student's level of learning. The purpose of this policy is to describe the procedures that should be followed by supervising physicians to ensure that the school adheres to expectations that protect patient and student safety in accordance with LCME Element 9.3:

A medical school ensures that medical students in clinical learning situations involving patient care are appropriately supervised at all times in order to ensure patient and student safety, that the level of responsibility delegated to the student is appropriate to his or her level of training, and that the activities supervised are within the scope of practice of the supervising health professional.

Scope

This policy applies to students in all courses at all training sites.

Definitions

Supervisors:

- 1. Attending physician of the College of Medicine;
- 2. Community teaching physician;
- 3. Resident physician or fellow in a Graduate Medical Education program;
- Physician Assistant and/or Nurse Practitioner under the supervision of a physician.

Levels of Supervision:

Direct Supervision: The supervisor is present in the same location as
the learner and is able to provide direct instructions and feedback
to the learner and can take over patient care duties if necessary.
Alternatively, a resident physician or another health professional
acting within her/his scope of practice may provide direct supervision
under the indirect supervision of an attending physician.

 Indirect Supervision: The supervisor is on duty, immediately available, and can be called to the location of the learner if necessary.

Students are not allowed to participate in patient care activities independently (without supervision). Students engaging in patient care activities in Phase 1 must always be directly supervised.

Students must be directly supervised for the first instance of each activity as outlined in the Required Patient Encounter List in all required Phase 2 clerkships. Students may be graduated to indirect supervision for these activities at the discretion of the supervisor after completion of this requirement.

Students in Phase 3 clinical rotations may receive indirect supervision in patient care activities at the discretion of their attending physician and the rotation director.

Expectations of Supervisors/Course Directors

- Model professional behavior in interactions with patients, learners, staff and all other individuals in the health care team.
- Provide students with progressively autonomous opportunities for learning that are commensurate with the learner's level of knowledge and technical skill and address specific learning objectives for the course.
- Ensure the student is appropriately supervised to ensure patient and student safety according to policies and procedures of the UNCOM and of the medical facility.
- 4. Ensure call schedules permit availability of a supervising physician within a timeframe that is reasonable for the clinical setting. In situations where a supervisor may be off-site, a suitable supervising physician (including resident) must be available and be aware of this expectation.
- Adjust student assignments and/or remedy in instances in which students are inappropriately supervised.
- Ensure medical students are aware of expectations for their behavior and of the procedures or other tasks they are permitted to perform according to their level of competence.
- 7. Ensure medical students have appropriate access to medical records and are aware of their ability to enter information into such records. Note that the specific policies and procedures of each medical facility may vary and any variations should be explained to the medical students.
- 8. Ensure patients are aware of the status of medical students and that they accept that medical students may participate in their care.
- Review and confirm information collected by students through history taking, physical examination or other activity on a regular basis and provide feedback that enhances the student's learning experience.
- Complete student assessments in a timely manner, with all assessments completed in time for calculation of final grades.
- Assess the adequacy of supervision with each student at midclerkship evaluation sessions and review cumulative supervision data as recorded in the patient encounter log semiannually.

Expectations of Students

1. Maintain professional behavior standards with the supervising physician, other members of the medical team, including resident physicians other health professionals, members of the staff, patients and any other individuals encountered in the clinical setting.

- 2
- Maintain self-awareness of own competence and seek assistance/ advice when clarification is needed.
- Inform patients and/or family members of their status as a medical student and the name of the supervising physician under whom they are working.
- Proactively inform the supervising physician or course director concerns about levels of supervision (excessive or sub-standard).
- Appropriately log required patient care activities in OASIS including level of supervision/observation.

Reporting Concerns

- Any student who is concerned about the level of supervision may report this to UNCOM faculty as follows:
- Students are encouraged to relay instances in which they feel they
 have not received appropriate supervision as soon as possible with
 their supervisor and/or course director. Course directors are to inform
 the Associate Dean for Medical Education of instances in which
 student concerns are raised.
- Students are asked at each mid-clerkship evaluation about any instances in which they were concerned about the level of their supervision. Course directors are to inform the Associate Dean for Medical Education of instances in which student concerns are raised and their immediate action plan to remedy the situation.
- An item in the student's evaluation of the clerkship asks the student if they had instances in which they were not appropriately supervised.
- Expressions of concern will be held in strict confidence if possible.
 However, this may not be possible in situations where student or
 patient safety may be compromised, illegal activities may have
 occurred, or other situations needing immediate contact with
 reporting individuals. Any student who is dissatisfied with the
 outcome of such a report should report their concerns to the campus
 director and/or the Associate Dean for Medical Education.

Monitoring

 The Associate Dean for Medical Education reviews all reports of inappropriate supervision and ensures adequate and timely resolution in cooperation with the relevant block/clerkship director(s). Clerkship directors review patient encounter log data, including information about supervision, semi-annually. The Curriculum Committee also receives an annual summary these data to act upon recurrent concerns.

Responsibilities

- Supervisor and/or Course Director is responsible for ensuring that this policy is followed and that all individuals who interact with the learner are appropriately trained and credentialed for the patient care interaction.
- Block and Clerkship Directors define the appropriate level of responsibility delegated to students for their level of training.
- 3. <u>Curriculum Committee</u>: Development/review of this and related policies. Review and approval of recommended course specific level of responsibility delegated to students for their level of training.
- Medical Students: Will be aware of the details of this policy and will identify and assist in rectifying any concerns about clinical supervision.

Last revised: April 25, 2017

Approved by the Clerkship Directors: July, 11, 2017 Approved by the Curriculum Committee: July 25, 2017 Revised by the OME: July 11, 2019

Approved by Curriculum Committee: September 24, 2019 Approved by Curriculum Committee: March 23, 2021

Reviewed and approved by the Curriculum Committee: January 23, 2024