



MEDICAL SCHOOL POLICY

Supervision of Medical Students During Clinical Activities

Senior Leader: Medical School Dean

Responsible University Officer: Senior Associate Dean for Undergraduate Medical Education

Policy Owner: Assistant Dean for Curriculum-TC

Policy Contact: Director for Integrated Education-Clinical

POLICY STATEMENT

The University of Minnesota Medical School (UMMS) provides its students with appropriate levels of supervision and meaningful feedback during the entirety of their undergraduate medical training. This includes providing supervision from members of the medical school faculty whose scope of practice is commensurate with the activity being supervised, and that such supervision occurs with appropriate frequency.

Students may be supervised at one of two broad levels as determined by the faculty supervisor:

- **Direct supervision:** the supervisor is present with the student and the patient
- **Indirect supervision:** the supervisor, while not in the presence of the student and/or patient, is immediately available to the learner and at the site of care to provide direct supervision as needed.

The amount of supervision required for each student will vary according to the clinical nature of each patient and experience and must be commensurate with the level of training, education, and experience of the student in conjunction with the scope of practice of the supervisor.

While engaged in clinical rotations or clinical activities, medical students shall be incorporated into the medical team as integral team members, permitted to participate in team care of the patient, and expected to take responsibility for patient care as permitted based on the student's level of training, expertise and experience.

Effective supervision should foster progressive responsibility and provide opportunities for students to demonstrate increasing independence when appropriate.

REASON FOR POLICY

This policy ensures the safety of patients and our students through the delineation of the procedures that define appropriate supervision.

In addition, this policy ensures the medical school meets the following LCME accreditation requirements:

Element 9.2: FACULTY APPOINTMENTS. "A medical school ensures that supervision of medical student learning experiences is provided throughout required clerkships by members of the school's faculty."

Element 9.3: CLINICAL SUPERVISION OF MEDICAL STUDENTS. “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.”

PROCEDURES

Expectations of the Medical School

- Qualified physicians, residents, or advanced practice providers of the Facility shall engage in the teaching and clinical supervision of students. Supervising physicians, including those assessing students, must all be members in good standing of the Facility’s medical staff authorized to supervise and/or provide resources for medical students
- Primary supervising physicians must hold a faculty appointment in the medical school. The medical school will provide such appointments as needed to ensure compliance with this requirement for all required clerkships at each clinical site. Such appointments must be made before assuming a supervisory role
- Physician residents or advanced practice providers may supervise students as a delegated responsibility from the primary supervising physician and must be supervised, themselves, in their teaching role by an individual who has a faculty appointment. This does not waive the supervising physician’s responsibility for the student and to the medical school
- Supervising physicians (and their designee) are responsible for ensuring student and patient safety during patient care activities
- Course/clerkship directors (and their designee) are responsible for assigning students to designated faculty and resident supervisors at clinical sites for all patient care experiences and for ensuring faculty, residents, and students are notified of these assignments, as well as expectations for student participation and supervision in patient care.
- Course/clerkship directors (and their designee) are responsible for communicating policies and procedures related to supervision, including:
 - The learning objectives and assessment methods for the clerkship
 - The required clinical experiences for the clerkship, including the levels of responsibility needed to satisfactorily meet each requirement
 - The procedures through which students can confidentially, and without fear of retaliation, report concerns regarding adequate and appropriate supervision. Procedures may include, but are not limited to UReport (to report mistreatment or negative learning environments), direct reporting to a clerkship or course director or coordinator, and documenting concerns in course or clerkship evaluations at the end of the course or clerkship
- Course/clerkship directors (and their designee) are responsible for monitoring compliance with the policies and procedures with a report to the appropriate curriculum committee

Expectations of Supervisors of Medical Students:

- It is the *faculty* supervisor’s role to ensure that any non-faculty supervisors who are engaged in clinical teaching of medical students are acting within their scope of practice
- It is the *faculty* supervisor’s role to ensure that they, and any other individuals providing supervision are aware of, and adhere to the learning objectives, assessment methods, and expectations for student participation. This includes the required clinical experiences for the clerkship, including the levels of responsibility needed to satisfactorily meet each requirement
- Students on duty must have rapid and reliable systems for communicating with faculty, their supervisor(s), and resident physicians
- Determination of appropriate level of supervision is made by the primary *faculty* supervisor, based on many factors, including:
 - Level of training of the student
 - Previous experience and skill of the student with the clinical activity and setting
 - Familiarity of the supervisor with the abilities of the student

- Acuity of activity and level of risk to patient
- The level of responsibility assigned to required clinical experiences
- The supervisor reviews and independently verifies student findings, assessments, and care plans, and documents this review
- Faculty supervisors are expected to notify the clerkship or course director (or their designee) immediately if serious academic or professional gaps in student performance exist that may jeopardize student and/or patient safety or the educational goals

Expectations of Medical Students

- Medical students may not provide care in an unsupervised fashion
- Medical students may not perform procedures without a minimum of indirect supervision with the supervisor immediately available. Many procedures require direct supervision
- Medical students provide patient care services under (direct or indirect) supervision of the faculty member or appropriate non-faculty supervisor. In all patient care contacts the patient shall be made aware that the individual providing the care and/or performing the procedure is a student
- Medical students should be aware of the required clinical experiences for each clerkship, including the level of responsibility needed to meet the requirement. Students should seek out appropriate supervision when engaging in such clinical encounters at the designated level of responsibility in order to ensure effective evaluation and assessment
- Students are encouraged to contact the attending and/or the clerkship or course director with problems or concerns in clinical, administrative, professional or educational matters

Monitoring and Notifications

- Individual departments, clerkship directors, and site directors should make every effort to proactively identify physicians who meet the requirements for a faculty appointment, as described above, and work with the appropriate administrative officers to secure the appropriate appointment
- Additionally, the UMMS will engage in regular auditing (at minimum annually) to ensure that physicians who supervise and assess medical students have the appropriate appointment and that departments are in compliance with this policy
- Periodic distribution of relevant policies, learning objectives, Graduation Competencies, assessment criteria, and other relevant educational expectations will be distributed to those with faculty appointments to ensure awareness of, and compliance with educational objectives

DEFINITIONS

Primary Faculty Supervisor

The primary supervising physician will have a faculty appointment within the medical school and may provide direct or indirect supervision of students during clinical activities and who may oversee non-faculty supervisors.

Non-Faculty Supervisor

Non-faculty supervisors may include physician residents or advanced practice providers who are, themselves, supervised in their roles by an individual who has a faculty appointment in the medical school.

RESPONSIBILITIES

There are no additional responsibilities beyond those covered above.

RELATED INFORMATION

There is no related information associated with this policy.

HISTORY

Amended: January 2019 - Office of Curriculum

Amended: August 2021

Approved: Medical School Education Committee, December 2021

Reviewed and approved: Medical School Education Committee, April 2023

Reviewed with Minor Updates: August 2023