



MEDICAL SCHOOL POLICY

Student Supervision During Clinical Activities

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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.

Further, UMMS provides students with clinical experiences that integrate progressive autonomy, as much as an educational experience can allow, in a safe and patient-centered manner.

To these ends, UMMS works with its teaching sites to ensure these elements of medical student education occur in an environment where they are effectively communicated and monitored, and that such environments provide for the safety of patients and students.

REASON FOR POLICY

This policy ensures the safety of patients and our students through appropriate supervision that cultivates the most effective learning.

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

Students of UMMS must be appropriately supervised when participating in required or elective clinical activities as outlined in this policy.

Students may be supervised at one of two broad levels as determined by the 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 shall be commensurate with the level of training, education, and experience of the student involved with a patient's care 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 demonstrate individual ownership of patient care responsibilities 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.

Expectations of the Medical School

- The medical school ensures that supervisors hold a faculty appointment in the medical school or, in the case of physician residents or advanced practice providers, be supervised, themselves, in their teaching and assessment role by an individual who has 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.
- In the case of community clinical placements, the medical school ensures that at a minimum, a physician site director faculty member is responsible for the oversight of the medical student's learning experience.
- Non-faculty supervisors of students may include physicians, residents, fellows, and other licensed health professionals supervising an activity within their scope of practice.
- Course/clerkship directors (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 that 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 to faculty and students participating in their curriculum, and for monitoring compliance with the policies and procedures with a report to the relevant oversight committee (Clinical Education Council-CEC or Education Council-EC).
- The director of the clerkship or course is responsible for communicating standard procedures through which students can confidentially report concerns regarding adequate and appropriate supervision of what they may deem a violation of this policy. Procedures may include, but are not limited to EthicsPoint (to report mistreatment or negative learning environment), 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.

Expectations of Faculty and Non-Faculty 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.
- 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 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 supervisor reviews and independently verifies all student findings, assessments, and care plans, and documents this review.
- 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 health professional. 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.
- Students should also perform self-assessment and report to the attending physician and resident identified areas for improvement along with a plan for improvement. Students should be encouraged to contact the attending and/or the clerkship or course director with problems or concerns in clinical, administrative, professional or educational matters.

FORMS/INSTRUCTIONS

There are no forms associated with this policy.

APPENDICES

There are no appendices associated with this policy.

FREQUENTLY ASKED QUESTIONS

There is no FAQ associated with this policy.

ADDITIONAL CONTACTS

Subject	Contact	Phone	Fax/Email
Primary Contact	Name	Phone	Fax/Email
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DEFINITIONS

Faculty Supervisor

Faculty supervisors have faculty appointments within the medical school and may provide direct or indirect supervision of students during clinical activities or oversee non-faculty supervisors in their teaching and assessment roles.

Non-Faculty Supervisor

Non-faculty supervisors of students may include physicians, residents, fellows, and other licensed health professionals supervising an activity within their scope of practice. Non-faculty supervisors are, themselves, supervised in their teaching and assessment roles by an individual who has a faculty appointment in the medical school.

Direct Supervision

In the case of direct supervision, the supervisor, whether faculty or non-faculty is present at all times with the student and patient during clinical activities.

Indirect Supervision

In the case of indirect supervision the supervisor, whether faculty or non-faculty, may not be present with the student and patient during a portion of, or for the entirety of a given clinical activity, but is on-site and immediately available to the learner to provide direct supervision as needed.

RESPONSIBILITIES

There are no additional responsibilities beyond those covered above.

RELATED INFORMATION

Text

HISTORY

Amended: January 2019 - Office of Curriculum