



# Max Rady College of Medicine Undergraduate Medicine Education Policy

<b>Policy Name:</b>	<b>Supervision of Learners (engaged in Clinical Activities)</b>
<b>Application/Scope:</b>	All learners in the UGME, PGME, and MPAS programs.
<b>Approved (Date):</b>	June 2018
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<b>Approved By:</b>	Dean's Council, Max Rady College of Medicine, June 2018

## 1.0 PURPOSE

- 1.1 To clarify the roles and responsibilities of Learners while engaged in clinical activities for educational purposes.
- 1.2 To ensure Learner participation in clinical activities appropriate to their level of education, training, and abilities.
- 1.3 To clarify the roles and responsibilities of Supervising Physicians/Preceptors to ensure that Learners are provided with appropriate supervision.
- 1.4 To ensure the safety and proper care of patients in educational settings.

## 2.0 DEFINITIONS

- 2.1. **AFC Learner** – a learner enrolled in an AFC (Diploma) Program.
- 2.2. **Area of Focused Competence (Diploma) Program (AFC)** – a highly-focused discipline of specialty medicine that represents supplemental competencies that enhance the practice of specialist physicians. AFC programs are accredited by RCPSC.
- 2.3. **Clinical Setting** – the location(s) where a Learner is engaging in clinical activities.
- 2.4. **CFPC** – College of Family Physicians of Canada.
- 2.5. **Clinical Supervisor/Preceptor** – the physician to whom a Learner reports during a given interval of time, such as an on-call shift. Residents or fellows often serve in the role of Clinical Supervisors, but they do not act as the Most Responsible Provider for patient care.
- 2.6. **Competency-Based Medical Education** – an outcomes-based approach to the design, implementation, assessment, and evaluation of a medical education program using an organizing framework of competencies.
- 2.7. **Competence Continuum** - the series of integrated stages in the competency-based medical education curriculum. The four stages/phases which apply to residency training include 1). Transition to Discipline; 2). Foundation of Discipline; 3). The core of Discipline; 4). Transition to Practice.
- 2.8. **CPGME** – the Max Rady College of Medicine Postgraduate Medical Education Office.
- 2.9. **CPSM** – College of Physicians and Surgeons of Manitoba.

- 2.10. **Direct Supervision** - a process of assessment whereby the assessor must witness the Learner performing the specific activity in order to identify whether specific competencies were demonstrated and performed correctly (e.g. physical examination of a patient).
- 2.11. **Entrustable Professional Activity (EPA)** - a “unit of professional practice” that is comprised of measurable tasks and abilities (milestones). Once sufficient competence is achieved, this task is “entrusted to the unsupervised execution by the trainee”.
- 2.12. **Fellow** - an individual who has completed sufficient training for specialty qualification in Canada or a foreign country. The fellowship is intended to permit the Learner to acquire additional experience over and above his/her basic specialty requirement. Often the fellowship provides the Learner the opportunity to acquire specific or more specialized expertise that will not normally be acquired during residency training.
- 2.13. **Formative Assessment** - is a process of assessment that provides real-time feedback to trainees and faculty about how well the Resident is progressing in each area being assessed. This information supports the ongoing learning and development for the Residents. Furthermore, it may provide diagnostic information regarding the need for Remediation.
- 2.14. **Faculty Appointment** - a formal University of Manitoba academic appointment.
- 2.15. **Graded Responsibility** - the provision of safe patient care matched with the individual Learner's level of advancement and competence, based on formative and summative assessments of the Learner's clinical experience, judgment, knowledge, and technical skills. Learners carry out activities under close supervision of a designated preceptor, and as they become more proficient, graduate to performing activities independently, with supervision as appropriate.

Competency-Based Medical Education (CBME) is part of the learning process the Learners' stage within the competence continuum and the achievement of EPAs provides a framework for Graded Responsibility and clinical supervision.

- 2.16. **Indirect Supervision** - is a process of assessment whereby the assessor utilizes documented information such as that recorded in a patient chart in order to identify whether specific competencies were attained by the Learner (e.g. patient chart review).
- 2.17. **Learner** - a Medical Student, Physician Assistant Student, Resident, Fellow, and AFC Learner registered within the Max Rady College of Medicine.
- 2.18. **Medical Student** - a student registered in the UGME program. The years of training of a Medical Student are further categorized as:
  - **Pre-Clerkship** – Year I or II of training of a Medical Student registered in the UGME program.
  - **Clerkship** – Year III or IV of training of a Medical Student registered in the UGME program.
- 2.19. **Moonlighting** – the extracurricular practice of medicine for remuneration by a Resident enrolled in a postgraduate medical education program leading to certification with the Royal College of Physicians and Surgeons of Canada (RCPSC) or the College of Family Physicians of Canada (CFPC). The Royal College and the College of Family Physicians do not encourage nor prohibit moonlighting and have outlined principles that must be considered.
- 2.20. **MPAS** – Master of Physician Assistant Studies at the Max Rady College of Medicine.
- 2.21. **PGME** - Postgraduate Medical Education at the Max Rady College of Medicine.
- 2.22. **Physician Assistant Student** - a student registered in the MPAS program or a physician assistant student placed pursuant to a University of Manitoba contract.
- 2.23. **Physician Assistant (PA)** - holds a certificate of practice and is on the CPSM Physician Assistant Registry. A Physician Assistant working within their approved practice description may supervise

a Physician Assistant Student.

- 2.24. **Provider of Record/Most Responsible Provider** – the practitioner who has final accountability for the medical care of a patient when the Learner is providing care. One practitioner must always be designated the Most Responsible Provider or Provider of Record for every patient to ensure continuity of care and appropriate monitoring and management of care. Whether a practitioner is on-site or not, he/she remains responsible for the care of the patient and would be expected to come in if the need arose.
- 2.25. **Resident** – a Learner enrolled in one of the Residency programs under the authority of the Associate Dean, PGME. The following is a listing of Resident categories within PGME at the Max Rady College of Medicine:
- A postgraduate learner who has obtained a Doctorate of Medicine (MD) and has an educational or a general license from the College of Physicians and Surgeons of Manitoba (CPSM)
  - A learner enrolled in the Clinical Health Psychology Program
  - A learner enrolled in one of the non-medical Residency Programs:
    - Clinical Biochemistry
    - Molecular Genetics and Cytogenetics
    - Clinical Microbiology
  - A learner enrolled in one of the College of Dentistry Programs
    - Oral and Maxillofacial Surgery
    - Dental Internship
    - Pediatric Dentistry
- 2.26. **RCPSC** – Royal College of Physicians and Surgeons of Canada
- 2.27. **Supervising Physician/Preceptor**– a physician who oversees, and is the Most Responsible Provider for, the clinical activities of one or more Learners, and has the appropriate privileges in the clinical setting.
- 2.28. **Summative Assessment** - is a process of assessment that is based on multiple sources of feedback on the global performance of the trainee over a specified period of time or over a stage of training.
- 2.29. **UGME** - Max Rady College of Medicine Undergraduate Medical Education.

### **3.0 POLICY STATEMENTS**

#### **Faculty Appointment**

- 3.1. A supervising Physician/Preceptor requires a Faculty Appointment in order to educate or supervise Learners engaged in clinical activities.

#### **Supervision and Responsibility**

- 3.2. Before having any patient contact, all Learners engaging in clinical activities, including elective clinical experiences and Moonlighting activities must have an identified supervising Physician/Preceptor who is licensed in the province of Manitoba and has the appropriate medical staff privileges in the Clinical Setting(s).
- 3.3. The final responsibility for any medical acts performed by Learners rests with their Supervising Physician/Preceptor.

- 3.4. The supervising Physician/Preceptor must provide appropriate supervision to the Learner, including without limitation:
- Ensuring the Learner, to whom he/she is delegating, has the appropriate skills, knowledge, and judgment to perform the delegated act and that an appropriate level of supervision is provided.
  - Providing assistance with management of patients under their care when action is requested by a Learner.
  - Ensuring ongoing, timely assessment of the Learner to determine their clinical competence and educational requirements.
  - Meeting regularly with the Learner to discuss their assessment, management, and documentation of patient care and to provide timely formative and summative feedback.
  - Reporting to the respective preceptor or Residency Program Director when a Learner exhibits behaviour that would suggest incompetence or incapacity; fails to behave in a professional or ethical manner, or otherwise engages in inappropriate behaviour.
  - Maintaining a professional Supervising Physician-Learner relationship.
- 3.5. A Learner shall immediately inform the supervising Physician if the Learner believes an assigned task is beyond their level of ability or learning.

#### Enrolment on the Educational Register

- 3.6. The following Learners must be enrolled on the Educational Register of the College of Physicians and Surgeons of Manitoba (CPSM):
- Medical students.
  - Physician Assistant students.
  - Residents who do not yet qualify for registration for a general license from the CPSM.
- 3.7. A Learner registered on the Educational Register is entitled to practice in an approved program but only under the supervision of the medical staff of that program.

#### Identification of Learners

- 3.8. All Learners engaging in clinical activities must wear appropriate identification that clearly designates their level of training in all encounters with patients and Clinical Setting staff. Medical students and Physician Assistant students shall wear their University of Manitoba student photo ID badges. Residents shall wear Winnipeg Regional Health Authority HSC photo ID.

#### Engagement in Clinical Activities

- 3.9. See Appendix 1 for a summary of approved clinical activities of Learners.

#### *Medical students*

- 3.10. At the discretion of the supervising Physician/Preceptor, Medical students may attend rounds, observe care being delivered, and participate in the hands-on delivery of care including conducting and documenting a history and a physical exam, writing progress notes in patient charts, or providing limited assistance in the operating room.
- 3.11. Medical students are not permitted to submit prescriptions to a pharmacist.
- 3.12. Medical students are not permitted to complete death certificates.
- 3.13. Pre-Clerkship Medical students are not permitted to write medical orders of any kind.
- 3.14. Pre-Clerkship Medical students are not permitted to complete forms for application to long-term care facilities or the home care program.
- 3.15. Clerkship Medical students, at the discretion of the supervising Physician/Preceptor and guided by the principles of Graded Responsibility, may carry out technical procedures on patients under the direct or remote supervision of a Supervising Physician/Preceptor, depending on the student's

level of competence and individual pace of achievement as determined by the preceptor. These procedures should be restricted to those previously discussed and agreed upon with the Provider of Record/Most Responsible Provider.

- 3.16. Clerkship Medical students may write or give orders concerning the investigation or treatment of a patient; however, these orders cannot be executed until they have been reviewed and countersigned by a physician.
- 3.17. Clerkship Medical students may complete forms for application to long-term facilities or to the home care program, however, these forms must be reviewed and countersigned by a licensed physician.

#### *Physician Assistant students*

- 3.18. At the discretion of the supervising Physician, Physician Assistant students may attend rounds, observe care being delivered, and participate in the hands-on delivery of care including conducting and documenting a history and a physical exam, writing progress notes in patient charts, or providing limited assistance in the operating room.
- 3.19. Physician Assistant students are not permitted to submit prescriptions to a pharmacist.
- 3.20. Physician Assistant students are not permitted to complete death certificates.
- 3.21. Year I Physician Assistants students are not permitted to write medical orders of any kind.
- 3.22. The Year I Physician Assistants students are not permitted to complete forms for application to long-term care facilities or the Home Care Program.
- 3.23. At the discretion of the supervising Physician, and guided by the principles of Graded Responsibility, Year II Physician Assistant students may carry out technical procedures on patients under the direct or remote supervision of a Supervising Physician, depending on the Physician Assistant's level of competence and individual pace of achievement as determined by the preceptor. These procedures should be restricted to those previously discussed and agreed upon with the Provider of Record/Most Responsible Provider.
  - 3.23.1. A Physician Assistant may provide educational supervision of Physician Assistant students at the direction of the supervising Physician.
- 3.24. Year II Physician Assistant students may write or give orders concerning the investigation or treatment of a patient; however, these orders cannot be executed until they have been reviewed and countersigned by a licensed physician
- 3.25. Telephone orders of Year II Physician Assistant students may be noted but may not be executed until they have been reviewed and countersigned by a licensed physician.
- 3.26. Year II Physician Assistant students may complete forms for application to a long-term care facility or the home care program, however, these forms must be reviewed and countersigned by a licensed physician.

#### *Residents*

- 3.27. At the discretion of the supervising Physician/Preceptor and based on the degree of entrustment responsibilities, Residents may attend rounds, observe or participate in the hands-on delivery of care including conducting and documenting a history and a physical exam, writing progress notes in patient charts and providing supervised assistance in the operating room.
- 3.28. At the discretion of the supervising Physician/Preceptor and guided by the principles of graded responsibility and entrustment, a Resident may carry out technical procedures on patients under the direct or remote supervision of a licensed physician, depending on the Resident's level of competence. These procedures should be restricted to those previously discussed and agreed upon with the Provider of Record/Most Responsible Provider.

- 3.29. Residents may write or give verbal diagnostic and therapeutic orders, which do not require a countersignature by the supervising Physician before implementation. It is expected, however, that since the supervising Physician is responsible for all orders written by their Resident, they should make clear to the individual Resident the types of decisions and orders which require prior approval. The responsibility for the content of the orders lies with the supervising Physician/Preceptor.
- 3.30. Residents are permitted to submit prescriptions to a pharmacist.
- 3.31. Residents are not permitted to complete death certificates.
- 3.32. Residents may complete forms for application to a long-term care facility or the home care program. These forms do not require a counter signature by a licensed physician.

#### Documentation in the Health Record

- 3.33. Documentation in the Health Record may be designated to Learners as prescribed by their respective training programs. Learners must indicate their designation after their entry.
- 3.34. The Clinical Supervisor/Preceptor is responsible for the quality of history and physical, order writing, progress notes, and operative notes ensuring that any documentation designated to a Learner is accurate, succinct, and completed on time.
- 3.35. Medical students and Physician Assistant students may record histories, physicals, and orders on the chart according to arrangements with the individual supervising the attending staff physician. All signatures should be further identified with the words "Medical Student" or "Physician Assistant Student", as applicable.
- 3.36. The supervising Physician/Preceptor or Resident delegate must review all documentation by Medical students and Physician Assistant students such as:
- Patient's history.
  - Physical examination.
  - Diagnosis and progress in hospital in a timely manner.
- Furthermore, the supervising Physician/Preceptor must review and appropriately countersign all transcribed orders concerning the investigation or treatment of a patient.
- 3.37. Residents may dictate reports, and documents on the chart and write orders according to arrangements with the individual supervising the attending staff physician. Counter-signatures are not required. In circumstances where the Resident is no longer available, the supervising Physician/Preceptor is responsible to complete all documentation and signatures.

#### Learner Placements Agreements

- 3.38. The UGME, CPGME, and MPAS programs shall ensure that Learner placement affiliation agreements with clinical setting sites are in place.

### **4.0 PROCEDURES**

N/A

### **5.0 REFERENCES**

- 5.1. University of Manitoba Academic Appointments Policy  
[http://umanitoba.ca/admin/governance/governing\\_documents/staff/297.html](http://umanitoba.ca/admin/governance/governing_documents/staff/297.html)
- 5.2. Max Rady College of Medicine Conflict of Interest Student Assessment or Advancement Policy  
[http://umanitoba.ca/faculties/health\\_sciences/medicine/education/undergraduate/media/Conflict\\_of\\_Interest\\_-\\_Student\\_Assessment\\_or\\_Advancement\\_Policy\\_FINAL.pdf](http://umanitoba.ca/faculties/health_sciences/medicine/education/undergraduate/media/Conflict_of_Interest_-_Student_Assessment_or_Advancement_Policy_FINAL.pdf)

- 5.3. College of Physicians and Surgeons of Manitoba Categories of Registration  
<http://cpsm.mb.ca/registration/categories-of-registration>
- 5.4. CPGME Resident Moonlighting Policy  
[http://umanitoba.ca/faculties/health\\_sciences/medicine/education/pgme/media/CPGME\\_Moonlighting\\_Policy.pdf](http://umanitoba.ca/faculties/health_sciences/medicine/education/pgme/media/CPGME_Moonlighting_Policy.pdf)
- 5.5. RCPSC – Terminology in Medical Education  
<http://www.royalcollege.ca/rcsite/educational-initiatives/terminology-medical-education-project-e>

## **6.0 POLICY CONTACT**

- 6.1. Associate Dean, Postgraduate Medical Education.
- 6.2. Associate Dean, Undergraduate Medical Education.
- 6.3. Program Director, Master of Physician Assistant Studies Program.

**Appendix 1: Summary of Clinical Activities of Learners**

<b>SUMMARY OF CLINICAL ACTIVITIES OF LEARNERS</b>				
<b>APPROVED DUTIES</b>	<b>MEDICAL STUDENT IN PRE-CLERKSHIP</b>	<b>MEDICAL STUDENT IN CLERKSHIP</b>	<b>PHYSICIAN ASSISTANT STUDENTS</b>	<b>RESIDENT</b>
<b>History &amp; Physical</b>	Yes, countersigned by supervising MD	Yes, countersigned by supervising MD	Yes, countersigned by supervising MD or PA	Yes
<b>Progress notes in patient chart</b>	Yes, with the designation after their entry	Yes, with the designation after their entry	Yes, with the designation after their entry	Yes, with the designation after their entry
<b>Medical orders: written or telephone</b>	No	Yes, countersigned by the supervising MD	Year 1 – No Year 2 – Yes countersigned by the supervising MD or PA	Yes
<b>Submit prescription to Outpatient Pharmacy</b>	No	No	No	Yes - Only postgraduate trainees who have a full license or have completed 18 months of residency, passed their Medical Council of Canada, MCCQE II exam, and attended the PGME Core Curriculum
<b>Operative reports</b>	No	No	No	Yes, countersigned by the supervising MD
<b>Discharge summary</b>	No	Yes, countersigned by the supervising MD	Year 1 – No Year 2 – Yes Countersigned by the supervising MD	Yes
<b>Death certificate</b>	No	No	No	No
<b>Forms for Home Care or long - term care facility</b>	No	Yes, countersigned by the supervising MD	Year 1 – No Year 2 - Yes countersigned by the supervising MD	Yes