PRECEPTOR ORIENTATION HANDBOOK

Tips, Tools, and Guidance for Physician Assistant Preceptors

Child Health Associate/Physician Assistant Program

University of Colorado Anschutz Medical Campus

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PAEA
PHYSICIAN ASSISTANT
EDUCATION ASSOCIATION

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Introduction

We would like to take this opportunity to express our sincere gratitude to our preceptors for their hard work and dedication to this program and our physician assistant (PA) students. The clinical experiences the student will obtain in your office or clinic are of critical importance to a successful learning experience in the program. The clinical setting *synthesizes* concepts and application of principles for quality health care delivery. You, as a clinical preceptor, are the key to successful learning experiences in the clinical setting. The PA student will work closely with you, learning from your advice and example. Through your supervision, the student will progressively develop the skills and clinical judgment necessary to become a practicing PA.

Thank you for your commitment to PA education.

CHA/PA Mission Statement

The mission of the Child Health Associate/Physician Assistant Program is to provide comprehensive physician assistant education in primary care across the lifespan, with expanded training in pediatrics and care of the medically underserved.

CHA/PA Program Information:
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CHA/PA Clinical Experiences

First Year Clinical Experiences
First year PA students begin their clinical experiences in the fall of their first year with a preparatory course called Clinical Bootcamp. Clinical placements for 1st year PA students begin in the spring semester and occur on Tuesdays for 6 weeks. Students are assigned to experiences in a variety of settings. Students work the hours of the preceptor(s).

Second Year Clinical Experiences
Second year PA students continue their clinical experiences in the summer immediately following their 1st year. During this summer, the 2nd year PA student completes two, 2-week clinical experiences that occur every day for the two-week period. Clinical experiences during the summer can be in any clinical setting. Students work the hours of the preceptor(s).

Clinical experiences for 2nd year PA students occur once a week on Tuesdays for 6 weeks in the fall and spring semesters. At the completion of the 2nd year, the student will have had four different clinical experiences.

Third Year Clinical Rotations
Third year PA students begin their 3rd year clinical rotations on June 1st and will complete their last rotation on April 30th. The 3rd year rotations are one-month long, beginning on the first day of the month and ending on the last day of the month. The student works the hours and days of the preceptor(s).

Students are permitted to take pre-scheduled time off during their 3rd year for professional development and self-care. This allows students an opportunity to work on a Capstone project, complete required trainings, perform practice-based learning and improvement opportunities, and engage in self-care programs.

CHA/PA Curriculum

1st Year

Summer	Summer Immersion	
Fall	• Hematology, Infectious Disease, Immunology, and Malignancy I • Gastrointestinal, Genitourinary and Renal I • Cardiovascular and Pulmonary I	• Clinical Skills I • Foundations in Prevention, Advocacy and Professional Practice I • Clinical Boot Camp
Spring	• Dermatology and HEENT I • Musculoskeletal and Neurology I • Endocrinology and Reproduction I • Psychiatry I	• Clinical Skills II • Foundations in Prevention, Advocacy and Professional Practice II • Clinical Experiences I— Community Clinic

2nd Year

Summer	Clinical Experiences II—Community Clinic, 2-week Experiences Clinical Experiences III—Community Clinic, 2-week Experiences	
Fall	• Hematology, Infectious Disease, Immunology, and Malignancy II • Gastrointestinal, Genitourinary and Renal II • Cardiovascular and Pulmonary II	• Clinical Skills III • Foundations in Prevention, Advocacy and Professional Practice III • Clinical Experiences IV—Community Clinic
Spring	• Dermatology and HEENT II • Musculoskeletal and Neurology II • Endocrinology and Reproduction II • Psychiatry II	• Clinical Skills IV • Foundations in Prevention, Advocacy and Professional Practice IV • Clinical Experiences V—Community Clinic

3rd Year

June-April	Clinical Rotations—One Month Each Traditional, Global Health, Pediatric Critical and Acute Care Longitudinal Experience and Care of Hospitalized Adult in a Novel, Graduated Experience tracks vary on required rotations.

General Goals of Clinical Experiences

Clinical experiences take students from the theoretical classroom setting to an active, hands-on learning environment to prepare them for a lifetime of continued refinement of skills and expanded knowledge as a practicing PA. To this end, the goals of the clinical experience include:

- Apply didactic knowledge to supervised clinical practice
- Develop and sharpen clinical problem-solving skills
- Expand and develop the medical fund of knowledge
- Perfect the art of history taking and physical examination skills
- Sharpen and refine oral presentation and written documentation skills
- Develop an understanding of the PA role in healthcare delivery
- Prepare for the Physician Assistant National Certifying Exam
- Develop the interpersonal skills and professionalism necessary to function as part of a medical team

CHA/PA Clinical Syllabi and Objectives

Clinical rotation objectives can be found in the syllabus. A copy of the syllabus and objectives can be found in the student documentation or online at: https://medschool.cuanschutz.edu/physician-assistant-program/preceptors

CHA/PA Clinical Experience Assessments

The CHA/PA Program is utilizing a developmental assessment method for clinical experiences. This allows preceptors to assess our students' skills, attitudes, and behaviors in a developmental approach, focusing on the skills that the student demonstrates in the clinical experience. The assessment allows students to identify areas of improvement and strengths, guide their future educational goals, and provide a measure of their progression through 6 of 8 CHA/PA Graduate Competencies over three clinical years.

Assessment Completion
The CHA/PA Program uses Typhon, an online database for submission of student assessments and preceptor evaluations. For a preceptor to complete an assessment for a student, the Typhon database requires us to have a unique email address for each of our preceptors. If you have not been contacted to provide your email address, please contact us.

Prior to the completion of the rotation, an email is sent from the clinical services coordinator to the primary preceptor with a website link to complete a rotation assessment on the student. We ask that completed assessment be submitted to the PA program no later than **7 days** from the completion of the rotation. Students are instructed to discuss their assessment with their preceptor prior to the completion of their rotation.

If at any time a preceptor has a concern about a student, we ask that the preceptor contact the Clinical Team early in the rotation and we will immediately schedule a site visit.

The Clinical Course Director will review the assessment once it is received. If concerns are raised by the preceptor, the clinical course director will contact the preceptor to discuss their concerns.

If you are unable to access Typhon, a PDF copy of the student assessment form can be found online at: https://medschool.cuanschutz.edu/physician-assistant-program/preceptors or can be requested by contacting the Clinical Team.

Clinical Rotation Grading
The final grade for the rotation will be given by the Clinical Course Director. Clinical rotations are graded as pass or fail.

CHA/PA Program Graduate Competencies

Similar to the Physician Assistant Professional Competencies (www.NCCPA.net), the CHA/PA Program has established graduate competencies. Upon graduation from the CHA/PA program students are expected to demonstrate competency in eight domains:

Patient Care
Provide patient-centered care that is compassionate, appropriate, and effective for the treatment of health problems (core clinical presentations) and the promotion of health.

Medical Knowledge or "Knowledge for Practice"
Demonstrate knowledge of established and evolving biomedical, clinical, epidemiological, and social-behavioral sciences, as well as the application of this knowledge to patient care.

Practice-Based Learning & Improvement
Demonstrate the ability to investigate and evaluate one's care of patients, to appraise and assimilate scientific evidence, and to improve patient care based on continuous self-evaluation and life-long learning.

Interpersonal & Communication Skills
Demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and health professionals.

Professionalism
Demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles.

Systems-Based Practice
Demonstrate an awareness of, and responsiveness to, the larger context and system of health care, as well as the ability to call effectively on other resources in the system to provide optimal health care.

Interprofessional Collaboration
Demonstrate the ability to engage in an interprofessional team in a manner that optimizes safe, effective patient and population centered care.

Personal & Professional Sustainability
Demonstrate the qualities required to sustain lifelong personal and professional balance.

. Student Case and Patient Logging

In addition to student assessments, the CHA/PA Program uses Typhon, for creating, collecting, and analyzing data for accreditation needs and confirmation that students have meet program expectations.

Students will be logging information into Typhon regarding patient demographics, clinical skills observed or performed, and clinical presentations and medical topics seen. The data obtained is in compliance with HIPAA and no patient-specific identifying information will be entered. Typhon adheres to all HIPAA regulations. This data is used to provide documentation of adherence with our accreditation standards as well as provide a synopsis of what was experienced during the clinical experience/rotation. To learn more about the Typhon system or to explore the program further you can visit the Typhon Group at http://www.typhongroup.com. There is a 3-minute video overview of the program as well as a detailed description of what the students will be able to do with the Typhon program.

Definition of the Preceptor Role

The preceptor is an integral part of the teaching program. Preceptors will serve as role models for the student and, through guidance and teaching, will help the student perfect skills in history taking, physical examination, effective communication, physical diagnosis, succinct recording and reporting, diagnosis/assessment, and creating a management plan, including a logical approach to further studies and therapy.

Preceptor Responsibilities

Preceptor responsibilities include, but are not limited to, the following:

- Orient students at the onset of the experience with the practice/site policies and procedures and review the expectations and objectives for the rotation.
- Provide ongoing and timely feedback regarding clinical performance, knowledge base, and critical-thinking skills. This can be done with the student informally each week or at a designated time and can be formally reported to the Clinical Course Director or via end-of-rotation assessments
- Supervise, demonstrate, teach, and observe clinical activities to aid in the development of clinical skills and ensure proper patient care
- Delegate to the student increasing levels of responsibility for clinical assessment and management as appropriate to the student's experience and expertise
- Participate in the evaluation of clinical skills and medical knowledge through:
  - o Direct supervision, observation, and teaching in the clinical setting
  - o Direct evaluation of presentations (including both oral and written)
  - o Assignment of outside readings and research to promote further learning
- Dialogue with faculty during site visits to evaluate student progress and assist the learning process
- Audit and co-sign charts to evaluate the student's ability to write appropriate and complete progress notes, histories, physical examinations, assessments, and treatment plans
- Complete and promptly return the assessment provided by the program, focusing on student knowledge and skills, as well as improvement throughout the rotation
- Promptly notify the PA program of any circumstances that might interfere with the accomplishment of

the above goals or diminish the overall training experience
- Serve as a role model for the student regarding ethical care of patients
- Demonstrate cultural sensitivity and effective communication in interactions with patients
- Spend a few minutes each week in a candid summary discussion with the student as to whether each is meeting the other's needs and expectations, and what changes need to be made in the roles and relationship
- Provide timely feedback to the student and the program regarding student performance

The Preceptor-Student Relationship

The preceptor should maintain a professional relationship with the PA student and always adhere to appropriate professional boundaries. Social activities and personal relationships outside of the professional learning environment should be appropriate and carefully selected so as not to put the student or preceptor in a compromising situation. Contact through web-based social networking sites (e.g., Facebook) should be avoided until the student fully matriculates through the educational program or completes the experience where the supervision is occurring. If the preceptor and student have an existing personal relationship prior to the start of the placement, a professional relationship must always be maintained in the clinical setting. Preceptors who have provided care for a student or his/her family members may not be assigned as the primary preceptor and may not complete an assessment of the student per Conflict-of-Interest rules in the School of Medicine. Please consult the Clinical Coordinator or the Clinical Site Educator with questions regarding this issue.

Orientation and Communicating Student Expectations

Orientation of the student to the rotation site serves several purposes. Orientation facilitates a quicker transition in allowing the student to become a member of the medical team. It also establishes a feeling of enthusiasm and belonging to the team as well as helping students develop the functional capability to work more efficiently.

On the first day of the experience/rotation (or when possible, prior to the start of the placement), the student should take care of any administrative needs, including obtaining a name badge and computer password, and completing any necessary paperwork, EHR training, and additional *site-specific* training, if needed.

Early in the clinical experience it is recommended that the preceptor and student formulate mutual goals regarding what they hope to achieve during the rotation. The preceptor should also communicate his or her expectations of the student during the rotation. Expectations can include:

- Hours
- Interactions with office and professional staff
- Call schedules (2nd year summer and 3rd year rotations)
- Overnight/weekend schedules (2nd year summer and 3rd year rotations)
- Participation during rounds and conferences
- Expectations for clinical care, patient interaction, and procedures
- Oral presentations
- Written documentation
- Assignments

- Write-ups
- Anything additional that the preceptor feels is necessary

Many sites find it helpful to create their own written orientation manual, which is given to the student prior to the first day of the rotation. This helps the students quickly become more efficient. Creating such a site-specific orientation/policy manual can be delegated to the students you host, with each "subsequent" student adding to a document that you as the preceptor maintain and edit. We would be happy to post any orientation material, pre-reading, videos to watch, etc. on our learning management system, so students arrive prepared for the experience. Please contact the Clinical Course Director for more information on this.

Students are expected to communicate with preceptors any special scheduling needs they may have during the experience/rotation — in particular, when they may be out of the clinical setting for program-required educational activities. If students anticipate missing clinical time for personal reasons, they should alert the Clinical Team well in advance of the clinic absence to have this approved prior to discussing this with the preceptor.

Preparing Staff

The staff of an office or clinic has a key role in ensuring that each student has a successful experience. By helping the student learn about office, clinic, or ward routines and the location of critical resources, they help a student become functional and confident. Students, like their preceptors, depend on staff for patient scheduling and assistance during a patient's visit. Students should communicate with the staff about procedures for making appointments, accessing medical records, bringing patients into exam rooms, ordering tests, retrieving test results, and charting.

Preceptors should not assume that receptionists, schedulers, and nursing staff automatically know what role the student will have in a practice. The preceptor should inform the staff about how the student will interact with them and with patients. Consider having a meeting or creating a memo with/for staff in advance of the student's arrival to discuss:

- Student's name
- Student's schedule (when they will be in the office)
- Student's expected role in patient care
- Expected effect of the student on office operation: Will fewer patients be scheduled? Will the preceptor be busier? How will patients be scheduled for the student?

Supervision of the PA Student

During a student's time at the clinic or hospital, the preceptor must be available for supervision, consultation, and teaching (or designate an alternate preceptor). Although the supervising preceptor may not be with a student during every shift, it is important to clearly *assign* students to another MD, DO, PA, NP or CNM, who will serve as the student's preceptor for any given time interval. Having more than one clinical preceptor has the potential to disrupt continuity for the student, but it also offers the advantage of sharing preceptorship duties and exposes students to valuable variations in practice style, which helps learners develop their professional identity. In the case where supervision is not available, students may be given an assignment or

may spend time with ancillary staff (x-ray, lab, physical therapy, etc.), as these experiences can be very valuable. The preceptor should be always aware of the student's assigned activities.

Students are not employees of the hospitals or clinics and, therefore, work entirely under the preceptor's supervision. Students are not to substitute for paid clinicians, clerical staff, or other workers at the clinical sites.

On each rotation, it is the student's responsibility to ensure that the supervising physician or preceptor also sees all the student's patients. The preceptor can provide direct supervision of technical skills with gradually increased autonomy in accordance with the PA student's demonstrated level of expertise. However, every patient must be seen, and every procedure evaluated prior to patient discharge. The preceptor must document the involvement of the PA student in the care of the patient in all aspects of the visit. The preceptor must also specifically document that the student was supervised during the entirety of the patient visit.

Medicare rules establish what student documentation may be used toward evaluation and management coding and billing. This is explained further in the "Documentation and Medicare Policy" section. The PA student will not be allowed to see, treat, or discharge a patient without evaluation by the preceptor.

Student Responsibilities

In addition to adhering to the standards of professional conduct outlined in the next section, 3rd year students are expected to perform the following during their clinical experiences:

- Obtain detailed histories and conduct physical exams, develop a differential diagnosis, formulate an assessment and plan through discussion with the preceptor, give oral presentations, and document findings
- Perform and/or interpret common lab and diagnostic results
- Educate and counsel patients across the lifespan regarding health-related issues
- Attend clinic as scheduled, as well as Grand Rounds, lectures, or conferences, if available
- Demonstrate emotional resilience and stability, adaptability, and flexibility throughout the clinical year

Expected Progression of PA student

PA students are trained to take detailed histories, perform physical examinations, give oral presentations of findings, and develop differential diagnoses. As their training continues through the 3rd year, they should be able to come up with an assessment and plan more effectively, though this will involve discussion with the preceptor. If the preceptor deems it necessary, students initially may observe patient encounters. However, by the end of the first week of the 3rd year rotations, students should actively participate in evaluating patients. As the preceptor feels more comfortable with the student's skills and abilities, the student should be allowed increasingly more supervised autonomy.

Feedback to Students

While students may have only one formal assessment during the clinical experience, it is imperative that they receive regular positive and constructive feedback from their preceptors to help improve their clinical performance.

Standards of Professional Conduct

As healthcare practitioners, PAs are required to conform to the highest standards of ethical and professional conduct. These include, but are not limited to:

- Respect
- Flexibility
- Academic integrity
- Honesty and trustworthiness
- Accountability
- Cultural humility

PA students are expected to adhere to the same high ethical and professional standards required of certified PAs. The professional conduct of PA students is evaluated on an ongoing basis throughout the professional phase (i.e., the didactic and clinical years) of the program. Violations of standards of conduct are subject to disciplinary actions administered by the University of Colorado and by the CHA/PA Program.

If preceptors observe any concerns about a student's professionalism, please contact the Clinical Team immediately.

Informed Patient Consent & Student Involvement in Patient Care

The patients are essential partners in this educational endeavor as well. All efforts will be made to observe strict confidentiality, respect patient privacy and dignity, and honor patient preferences regarding treatment. All students complete HIPAA training prior to their clinical experiences. However, patients must be informed that a physician assistant student will participate in their care, and the patient's consent must be obtained. This may be done through standardized forms at admission or on a person-by-person basis. The students should be clearly identified as a PA student and must also verbally identify themselves as such. If the patient refuses the PA student's services, the request must be honored. Patients must know that they will see their regular provider, and they should have an explicit opportunity to decline student involvement.

Student Documentation

If allowed by the preceptor and/or facility, PA students may enter information in the medical record. Preceptors should clearly understand how different payers view student notes as related to documentation of services provided for reimbursement purposes. Any questions regarding this issue should be directed to the

Clinical Course Director. Students are reminded that the medical record is a legal document. All medical entries must be identified as "student" and must include the PA student's signature with the designation "PA-S."

The preceptor cannot bill for the services of a student without seeing the patient and verifying the documentation created by the student. Preceptors are required to document the services they provide as well as review and edit all student documentation. Students' notes are legal and contribute to the medical record, thus the emphatic requirement that preceptors review, edit, append, and co-sign student notes. Moreover, writing a succinct note that communicates effectively is a critical skill that PA students should develop. The introduction of EHRs (electronic health records) presents obstacles for students if they lack a password or are not fully trained in the use of one institution's EHR system. In these cases, students are encouraged to hand-write notes, if simply for the student's own edification, which should be reviewed by preceptors whenever possible for feedback.

Medicare Policy

CMS no longer requires that clinicians serving as preceptors re-perform student-provided documentation. As of January 1, 2020, preceptors can now verify (sign and date) student documentation. This makes the role of preceptor significantly easier as they are able to spend more time teaching and less time documenting. Students also benefit from increased experience with electronic health records, better preparing them for practice.

All physician, PA, and nurse practitioner preceptors are allowed to verify medical record documentation provided by PA students. It is important to note that there are no restrictions on the verification of student-provided documentation based on the profession (i.e., a preceptor does not have to be a PA to verify the documentation of a PA student). https://paeaonline.org/our-work/advocacy-for-pa-education/emerging-advocacy-issues

Prescription Writing

Students may transmit prescribing information for the preceptor, but the preceptor must sign all prescriptions. More specifically, the student's name is not to appear on the prescription. For clinical sites that use electronic prescriptions, the preceptor MUST log into the system under his/her own password and personally sign and send the electronic prescription. These guidelines must not be violated by the student or the preceptor.

The Preceptor-Program Relationship

The success of clinical training of PA students depends on maintaining good communication between the student, the PA program, the preceptor, and the Clinical Team. All members of the team should share contact information.

If a preceptor has a question or concern about a student, they should contact the Clinical Course Director. The program strives to maintain open faculty–colleague relationships with its preceptors and believes that, should problems arise during a rotation, by notifying appropriate program personnel early, problems can be solved without unduly burdening the preceptor. In addition, open communication and early problem solving may

help to avoid a diminution in the educational experience.

As life-long learners, we know that providers are constantly honing and improving their skills in all areas of patient care, and we know that bedside teaching and precepting is no different. To facilitate your growth as a preceptor, the CHA/PA Program strives to provide preceptors with annual feedback in accordance with the School of Medicine policies. Preceptors who take three or more students in an academic year or 3 or more students over 5 years can receive de-identified student feedback to provide feedback on strengths and areas for improvement as a bedside teacher.

Specific Program Policies

Please refer to our website for program-specific policies on the following:

- Workers' Compensation
- Liability Insurance
- Needlestick protocols – "What should I do if…"

Preceptors, sites, and students will have copies available with the student's immunization record, documentation of HIPAA training, Blood Borne Pathogen Training, TB Mask Fitting, Letter of Good Standing, Curriculum Vitae, and Drug Screening.

The following link provides information about federal laws that protect students against racial, sexual, or age discrimination: https://www.ucdenver.edu/offices/equity.

Liability Insurance

Each PA student is fully covered for malpractice insurance by the PA program. Students completing a formal elective rotation with a preceptor or site that may end up becoming an employer must maintain a "student" role in the clinic and should not assume responsibilities of an employee until after matriculation from the program. This includes appropriate, routine supervision with the preceptor of record and within the scope of the agreed-upon clinical experience. This is vital in preserving the professional liability coverage provided by the university and is important to protect both the student and the employer in the case that legal action is sought by a patient. Even more critical is the occasional opportunity, or suggestion, from a potential employer to participate in patient-care activities outside of the formal rotation assignment prior to graduation. While these opportunities may be attractive and are seemingly benign, they must be avoided at all costs, as the university's liability coverage does not cover the student in these circumstances.

In addition, if a PA student is working in a paid position in a different health-care related capacity any time during their PA education, that individual is not permitted to assume the role of a PA student while on duty as a paid employee. Even in a shadowing capacity, it is not appropriate for a student to represent themselves or participate in the care of any patient outside of the role for which they are assuming. Liability insurance will not cover any student assuming the "PA student" role outside of an assigned clinical experience.

The University of Colorado Professional Liability Insurance Coverage document for PA students can be found in Appendix A.

Preceptor Development

The following tools and resources can be found on our website:
- Ask-Tell-Ask Feedback Model
- Incorporating Students into Patient Care Workflow
- Introducing and Orienting a PA Student
- One-Minute Preceptor
- SNAPPS
- Tailoring Clinical Teaching

https://medschool.cuanschutz.edu/physician-assistant-program/preceptors

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Pace University Physician Assistant Program

University of Utah Physician Assistant Program

Yale University School of Medicine

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