



TOURO UNIVERSITY

C A L I F O R N I A

COLLEGE OF EDUCATION
AND HEALTH SCIENCES

Clinical Preceptor Handbook



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COLLEGE OF EDUCATION AND HEALTH SCIENCES
School of Health Sciences

Dear Clinical Preceptor:

Thank you for your commitment to Physician Assistant clinical education. Your dedication to teaching and enthusiasm for your practice is basis for an excellent learning environment. The skills and experience that the students obtain through working with you and your colleagues will provide the foundation for a career of learning.

This handbook is designed to give you an overview of the Touro University California Joint MSPAS/MPH Program and to anticipate questions that may arise in your duties as a preceptor. Your feedback is very important; please let us know if there is additional information that should be included in this handbook.

Thank you for providing our students with a hands-on experience in patient assessment and care. They will require an initial orientation to your practice. It is expected that you will need some time to assess their abilities. As you become more comfortable with their skills and abilities, it is hoped you will allow them to assume more responsibility. Under your supervision students should take an active role in obtaining histories and performing physical examinations, ordering and interpreting diagnostic tests, making diagnoses and developing treatment plans, prescribing medications and providing patient education. They should also participate in performing common procedures. It is important that students have exposure to multiple healthcare settings, such as inpatient, outpatient and long term care settings. As such we request that students accompany you to these facilities when applicable and participate in the patient care. In order to augment the clinical experience, students will return to campus for periodic examinations, case presentations, discussions and seminars.

For your information, all students undergo a complete criminal background check, prior to the start of the clinical rotations. In addition, when requested by the site or facility, students are also required to undergo drug and alcohol testing.

Thank you for providing for our students a meaningful and practical experience. Your generous contribution of time, guidance, and dedication is much appreciated.

Sincerely,

Jennifer Pimentel, MAEd
Director of Clinical Education
Joint MSPAS/MPH Program

Charlie Clements, MD, MPH
Clinical Coordinator
Joint MSPAS/MPH Program

Program Overview & Guidelines for the Clinical Preceptor Joint MSPAS/MPH Program

Mission Statement

Through the integration of the Physician Assistant and Public Health disciplines, the mission of the Joint MSPAS/MPH Program is to:

- 1) Train quality PAs to work with underserved populations,
- 2) Recruit applicants from these communities or individuals with a demonstrated interest in serving these communities, and
- 3) Increase access to care for underserved populations

Program Accreditation

Touro University California is located in Vallejo, California and is a branch campus of Touro College, New York. Touro University California is accredited by the Western Association of Schools and Colleges (WASC). The PA Program holds accreditation through the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA).

The Scope of Physician Assistant Practice

Physician assistants are licensed health care professionals who practice medicine with the supervision of licensed physicians. As part of the physician/PA team, PAs exercise autonomy in diagnosing and treating illnesses. Physician assistants are educated to:

- Obtain medical histories
- Perform physical examinations
- Diagnose acute and chronic illnesses
- Develop and implement treatment for acute and chronic illnesses
- Perform emergency evaluation and treatments
- Perform minor surgical procedures
- Order and interpret routine diagnostic tests
- Perform diagnostic procedures
- Assist in surgery, including first assistant responsibilities
- Prescribe medications
- Provide education and counseling regarding illness, health promotion and disease prevention

Student Level of Knowledge

The major focus of clinical rotations should be the application and enhancement of basic clinical skills and reasoning along with critical thinking. Physician assistant students generally function at the level of a 3rd or 4th year medical student. The exact level will vary depending on the student's prior health care experience and the number of previous rotations they have completed. Additionally, students on their sixth rotation should be expected to be more competent than students on their first rotation. Students near the end of their rotations should begin to increasingly shift their focus toward treatment issues.

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Class 2018 Curriculum

Pre Clinical Didactic Curriculum: (18 months)

<p><i>Session I - 21 units</i> Principles of Basic Science Principles of Pharmacology Anatomy w/ Lab Behavioral Medicine for Primary Care Biostatistics Epidemiology Behavioral/Social Aspects- Public Health Environmental Health</p>	<p><i>Session II - 26 units</i> Clinical Medicine I Clinical Applications I Pharmacology I PA Profession and Practice Lab Medicine Health Policy and Management Health Disparities/Global Health</p>
<p><i>Session III - 12 units</i> Clinical Medicine II Clinical Applications II Pharmacology II Psychiatry for Primary Care Maternal Child Health 1 Health Education/Emerging Health Threats Research Methods</p>	<p><i>Session IV - 24units</i> Emergency Medicine Pharmacology III Clinical Medicine III Clinical Applications III Maternal Child Health II Program Evaluation/Global PH Comprehensive Review Course</p>
<p><i>Session V -6units (6 week session)</i> Surgical & Clinical Skills Geriatrics Clinical Applications IV Orientation to Clinical Year</p>	

Clinical Year: (54 weeks)

In the second, clinical portion of the program, students spend six (6) weeks each in six required clinical rotations:

- | | |
|--|---|
| <ul style="list-style-type: none"> • Primary Care 1 • Primary Care 2 • Primary Care 3 • Primary Care 4 | <ul style="list-style-type: none"> • Emergency Medicine • Surgery • Elective 1 and 2 • PH Field study |
|--|---|

Post Clinical Didactic Curriculum: (5 weeks)

<p><i>Session VIII - 6 units</i> MSPAS Summative Course MPH Capstone</p>

Guidelines for Clinical Preceptors

Clinical Preceptor Responsibilities

The role and responsibility of the Preceptor is central to the clinical experience of the student. The Preceptor must be a licensed healthcare provider and is responsible for the on-site supervision, training, assessment and evaluation of the physician assistant student. Rotations are designed to expose the physician assistant student to patient care in a variety of settings. The student shall be directly involved in the evaluation and management of patients based on the level of knowledge and skills of the physician assistant student.

1. **Orientation** - Arrange a tour and orientation to the practice, including: staff introductions, operating practices, scheduling system, medical records and EMR system. Clearly define your expectations and goal for the rotation.
2. **Student Schedule** - The Preceptor determines the student's schedule. Students are expected to adhere to the Preceptor's work schedule. Students are expected to work at the site at least 30 - 40 hours per week but this can vary depending on the site, with a **minimum of 24 hours** and a **maximum of 60 hours** per week. When a preceptor is seeing patients, it is expected that the student will be working as well. Students are expected to work nights, weekends, and be on-call if required by the site. Students may need to return to campus for administrative reasons. If this occurs, the student will notify you at least 24 hours in advance.
3. **Clinical Experience** - Students should spend as much time as possible involved in supervised hands-on patient care activities. Exposure to a high volume and diversity of patients enhances their learning experience. It is especially important that all students obtain exposure to patients across the entire life span and across different health care settings, such as inpatient, outpatient and long term care.
4. **Observation of student skills** - The preceptor should observe the student performing clinical functions such as history taking, physical examination, performance of procedures and clinical documentation. It is not necessary that the preceptor observe these functions for all patients in routine cases. Students should present their cases after you have demonstrated the desired format for oral presentations.
5. **Learning objectives/Minimum requirements** - Learning objectives have been developed for preceptors and students as a guide to the clinical experience. They are designed to be an overview for the approach to the rotation, as well as outline content areas on which the student will be tested upon completion of the rotation. They are not intended to be limiting or exhaustive, nor is it intended that the student will be exposed to all items during their rotation. Minimum requirements have also been developed. These represent the minimum number of exposures to a specific medical or surgical situation that must occur during a student's clinical year. Please review the learning objectives and

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minimum requirements with the student. **Learning objectives and minimum requirements are included in your packet.**

6. **Supervision** - The preceptor is responsible for the overall supervision of the physician assistant student's educational experience at the clinical site. The physician assistant student will be supervised in all his/her activities commensurate with the complexity of care being given and the student's own abilities. **An assigned qualified practitioner (attending physician, resident physician, PA, NP) must be on the premises and available at all times while the student is performing patient care tasks.** The student must know who this person is and how to contact them. **Unusual or abnormal physical findings must be confirmed.** Students require supervision for procedures. **All patients must be evaluated by a licensed provider PRIOR to leaving the facility.** The licensed provider retains all legal responsibility and medical duty for all patient care.
7. **Assignment of Activities** - The preceptor should assign the students to appropriate clinical oriented activities such as: which patients to examine and/or follow, what procedures to perform, what labs to collect, and which surgical procedures to assist in. Students shall not be used to substitute for regular clinical or administrative staff. However, it is appropriate for students to be assigned other activities associated with patient care appropriate for their level of training, such as reviewing diagnostic results, patient phone calls, prior authorization paperwork and prescription renewals.
8. **Documentation** - Preceptors must review and countersign all student documentation. Students need to be assigned a separate log in for the EMR system.
9. **Teaching** - The Preceptor should allow time for teaching activities. This can be accomplished in a variety of ways such as structured teaching rounds, chart review periods, reading assignments, hallway or informal consultations between patient encounters and/or recommending specific conferences. It is expected that the preceptor will model, expose students to and teach in accordance with current practice guidelines and the accepted standards of care.
10. **Evaluation** - The preceptor, or his/her designee, must observe and assess the student performing clinical functions, including documentation, on a regular basis and provide constructive verbal feedback to the student periodically over the course of the rotation. The preceptor may also be asked to give feedback on student performance to faculty members during site visits. The preceptor will be responsible for completing two performance evaluations, covering clinical knowledge and professionalism. Categories of evaluation are provided in descriptive words, however, a numeric Likert scale is applied for grade calculation. Receiving honest critique and constructive feedback is critical to the academic and professional progression of a student.

Mid-Rotation Evaluation

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The mid rotation evaluation is completed at the end of the third week. This evaluation is to provide constructive feedback to the student, and to modify goals for the final half of the rotation.

End of Rotation Evaluation This evaluation should be completed by clinicians who are familiar with the student's performance. This evaluation should be reviewed with the student unless the preceptor feels uncomfortable doing this. The preceptor should place the written evaluation in the envelope provided, seal the envelope, and sign the back of the envelope over the seal. **Final rotation grades cannot be determined without the evaluation, which may impact the student's financial aid; therefore your prompt submission is greatly appreciated.**

11. **Problems** - Preceptors should initially attempt to handle minor problems directly with the student. Major or persistent problems with students should be referred to the Clinical Coordinator or Program Director.

12. **Vacation** - The Preceptor must inform the Program if he/she will be taking a vacation of one week or greater while supervising a student. Student supervision may be delegated to another licensed healthcare provider during the period of absence with Program approval. If this is not possible, a written assignment requiring an equivalent amount of time is appropriate.

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Student Responsibilities

The following is a list of guidelines the student must adhere to during their participation in clinical rotations. Failure to adhere to these responsibilities should be reported to the program immediately.

1. **Attendance** - Students are expected to adhere to the student schedule determined by the preceptor. In the event of illness or emergency necessitating absence from the clinical rotation site, students are required to contact the precepting physician immediately as well as the program office. A student may be required to make up all time lost as a result of excused absences, unless specifically exempted by the preceptor and clinical coordinator. Unexcused absences should be reported to the program.
2. **Timeliness** - It is the responsibility of the student to report to clinical sites promptly at assigned times designated by the preceptor. If a student feels they will be late they must contact the preceptor. Repetitive lateness should be reported to the program.
3. **Attire** - Students are expected to dress in conservative professional attire and present a clean neat appearance. Students should wear a short white clinical jacket with the Program patch at all times except when specifically requested not to do so by the preceptor. Students cannot wear full-length lab coats.
4. **Identification** - Students must introduce themselves to every patient using their name, and the term "physician assistant student". While in the Program students may not use previously earned titles (i.e. RN, MD, DC, PhD, etc.) for identification purposes. Students must wear their Program issued identification name-tag at all times on clinical sites. If additional ID is required by the site, both ID badges shall be worn.
5. **Student Role**- Students must be aware of their limitations as students and of the limitations and regulations pertaining to PA practice. Students at clinical sites must always work under the supervision of a Preceptor. They may not function in the place of an employee or assume primary responsibility for a patient's care. **Students shall not treat and discharge a patient from care without consultation with the clinical preceptor.** Students should seek advice when appropriate and should not be evaluating or treating patients without supervision from, and direct access to a supervising clinical preceptor at all times. Students shall perform only those procedures authorized by the preceptor. Students must adhere to all regulations of the Program and the clinical sites.
6. **Demeanor** - Students must conduct themselves in a professional and courteous manner at all times displaying respect for the privacy, confidentiality, and dignity of patients, preceptors, faculty, staff, health care workers and fellow students. Displays of aggression, argumentative speech (in verbal and/or written correspondence), threatening language or behavior, inappropriate sexual conduct or speech, demeaning language, and behavior and language that is deemed to be insensitive to, or intolerant of, race, religion, gender,

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sexual orientation, and ethnicity to and/or overheard by Program faculty, a Preceptor, staff and/or patient will **not** be tolerated.

7. **Integrity** - Students must display the highest ethical standards expected of a health care professional. Unethical behavior such as cheating, forgery, plagiarism, harassment, intimate relations with patients, clinic/hospital staff or preceptors, falsification of logs/evaluations or medical records, falsification or misuse of medications/prescriptions, or other inappropriate behaviors will not be tolerated. Students displaying this type of behavior should be referred to the program immediately. Students should not accept gifts from preceptors, patients or families.
8. **Confidentiality**- In accordance with the guidelines for ethical conduct of the PA profession and in compliance with HIPPA Standards, students must respect and maintain the confidentiality of patients. Students are not permitted to discuss any patients by name or any other identifiable means outside the clinical encounter. For academic presentations and H&P and/or SOAP assignments, all identifiable information must be removed as per HIPAA requirements.
9. **Health and Safety**- Contact the program immediately if a student's actions directly or indirectly jeopardize the health and safety of patients, faculty, clinical site staff or fellow.
10. **Nondiscrimination**- Students shall deliver quality health care service to patients without regard to their race, religion, gender, creed, national origin, sexual orientation, socioeconomic status, disability, disease status, legal involvement, or political beliefs.
11. **Impairment**- Students shall not appear at the university or clinical sites under the influence of alcohol or drugs. Should this occur, contact the program immediately.
12. **Preparation**- Students must report to clinical sites fully prepared for work with all necessary equipment (i.e. stethoscope, etc.).
13. **Site Regulations**- Students must comply with all rules, regulations, bylaws, and policies of the site for which they are assigned.

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IMPORTANT INFORMATION

Harassment

Touro University California is committed to providing a work environment free of unlawful harassment. Touro University California abides by federal and state laws which prohibit workplace harassment, including the California Fair Employment and Housing Act, Government Code Section 12940, et. seq., and Title VII of the Civil Rights of 1964, as amended.

The University prohibits sexual harassment, environmental harassment and harassment based on pregnancy, childbirth or related medical conditions, race, religious creed, color, national origin or ancestry, physical or mental disability, medical condition, marital status, age, sexual orientation, or any other basis protected by federal, state, or local law or ordinance or regulation. All such harassment is unlawful. This policy applies to all persons involved in the operation of Touro University California and prohibits unlawful harassment by any employee of the University, including supervisors, coworkers **and preceptors**. It also prohibits unlawful harassment based on the perception that anyone has any of those characteristics, or is associated with a person who has or is perceived as having any of those characteristics.

- Harassment is any behavior by a person(s) that is offensive, aggravating or otherwise unwelcome to another person.
- Environmental harassment is any severe or pervasive action that results in a hostile or offensive working environment for the recipient. Environmental harassment is also known as hostile environment harassment.
- Sexual harassment is defined as any unwelcome sexual advances, requests for sexual favors or other verbal or physical conduct of a sexual nature. The conduct need not be motivated by sexual interest, but need only be of a sexual nature to be considered sexual harassment. Sexual harassment is one form of unlawful harassment.

Medicare Guidelines for PA Student Preceptors

The following are guiding principles for PA student preceptors for the Medicare program and should provide a framework for supervising PA students:

- The authorized Medicare practitioner/clinical preceptor is ultimately responsible for assuring the highest quality patient care;
- The authorized Medicare practitioner/clinical preceptor is the only individual who has the ability to submit a claim for care delivered to Medicare beneficiaries;
- The clinical preceptor's responsibility is to insure that the appropriate standard of care is received by the patient;

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- On each visit where evaluation and management services are provided, or medical/surgical procedures are performed, the patient should be always be personally seen and treated by the clinical preceptor;
- The clinical preceptor must supervise the activities of the student; and
- Students may document services in the medical record. However, the documentation of an E/M service by a student that may be referred to by the teaching physician is limited to documentation related to the review of systems and/or past family social history. The teaching physician may not refer to a student’s documentation of physical exam findings or medical decision making in his or her personal note. If the PA student documents E/M services, the teaching **physician must verify and re-document the history of present illness** as well as perform and re-document the physical exam findings and medical decision making activities of the service. This requirement remains in effect with EMR/EHR systems as well. Preceptors should not permit students to document in EMR systems utilizing the preceptor password. {Medicare Carriers Manual, 11/22/02, Part 3, Section 15016}

EMR/EHR Use by students

It is illegal for anyone to use another’s identifiers while utilizing an EMR/EHR system. This includes students documenting in a patient’s chart using the licensed provider’s ID and password. Most EMR/EHR systems have the ability to generate a “student user” that will limit the fields accessible. Using a student ID will allow for more accurate documentation, compliance with Medicare guidelines and prevent student access to electronic prescriptions.

Liability

Touro University provides professional liability coverage to students while at approved training sites. It is important to note that, at all times, the training site retains the sole responsibility for its patients’ care and treatment while students are receiving supervised clinical experience. The training site and preceptor(s) are responsible for supervision and oversight of the student in all patient care activities.

Students must immediately report any potential medical liability incidents, including blood-borne pathogen exposures, to the preceptor and the program’s clinical year team.

Important Program Numbers

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