POLICY TITLE
Clinical Supervision of Medical Students

PURPOSE AND SCOPE
The purpose of this University of North Carolina School of Medicine (UNC SOM) policy and procedure is to define the expectations for supervision of medical students on clinical services in the curriculum of the School of Medicine. This policy applies to students in all courses on all campuses.

RESPONSIBLE PARTY AND REVIEW CYCLE
Vice Dean of Education and Education Committee shall review this document within each even numbered fiscal year with input from the Application Phase Committee.

LCME REFERENCE(S)
LCME Element 9.3: Clinical Supervision of Medical Students

HISTORY OF APPROVALS AND UPDATES
Approved by Education Committee on January 23, 2017
Amended and Approved by Education Committee on December 16, 2019

DEFINITION(S):

Supervisor can be:

a. An attending physician of the School of Medicine,
b. A community teaching physician with a UNC SOM faculty appointment, or
c. A resident physician or fellow in a Graduate Medical Education program contractually affiliated with the UNC SOM.
d. Other licensed health professional acting within her/his scope of practice.

Levels of Supervision

a. Direct Supervision: The supervisor is present in the same location as the learner and is able to provide direct instructions and feedback to the learner in real time and can take over patient care duties if necessary. Alternatively, a resident physician or another health professional acting within her/his scope of practice may provide direct supervision under the indirect supervision of an attending physician.
b. Indirect Supervision: The supervisor is on duty, immediately available, and can be called to the location of the learner if necessary. The supervisor verifies in person all relevant components of the history and physical exam that are obtained independently by students and verifies and communicates in person to the patient the assessment and plan.

POLICY
Medical students must be provided with appropriate levels of supervision as they progress through their education towards a career in patient care. Medical students may perform the history or physical exam under indirect supervision. Medical students may perform procedures under direct supervision. The purpose of this policy is to describe the procedures that should be followed by supervising physicians to ensure that the school adheres to expectations that protect patient and student safety in accordance with LCME Element 9.3:

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.

Interactions with allied health professionals
In situations where learners interact directly with allied health professionals (physician assistants, nurse practitioners, etc.) the supervisor and/or course director is responsible for ensuring that the allied health professional is appropriately credentialed or functioning under the supervision of a credentialed faculty member and is performing tasks that are within his/her scope of practice. The attending faculty member is responsible for the integrity of information and/or clinical procedures. Supervisors should be familiar with the processes for credentialing of non-faculty health professionals and ensure that students are only assigned to those individuals with credentials relevant to the clinical service.

Expectations of Supervisors/Course Directors
a. Model professional behavior in interactions with patients, learners, staff and all other individuals in the health care team.
b. Provide students with progressively autonomous opportunities for learning that are commensurate with the learner’s level of knowledge, technical skill, and level of training and address specific learning objectives for the course.
c. Ensure the student is appropriately supervised to ensure patient and student safety according to policies and procedures of the School of Medicine and of the medical facility.
d. Ensure call schedules permit availability of a supervising physician within a timeframe that is reasonable for the clinical setting. In situations where a supervisor may be off-site, a suitable supervising physician (including resident) must be available and be aware of this expectation.
e. Ensure medical students are aware of expectations for their behavior and of the procedures or other tasks they are permitted to perform.
f. Ensure medical students have appropriate access to medical records and are aware of their ability to enter information into such records. Note that the specific policies and procedures of each medical facility may vary and any variations should be explained to the medical students.
g. Ensure patients are aware of the status of medical students and that they accept that medical students may participate in their care.
h. Review and confirm information collected by students through history taking, physical examination or other activity on a regular basis and provide feedback that enhances the student’s learning experience.

i. Complete student assessments in a timely manner, with all assessments completed in time for calculation of final grades.

Expectations of Students.

a. Maintain professional behavior standards with the supervising physician, other members of the medical team, including resident physicians, other health professionals, members of the staff, patients and any other individuals encountered in the clinical setting.

b. Maintain self-awareness of own competence and seek assistance/advise when clarification is needed.

c. Inform patients and/or family members of their status as a medical student and the name of the supervising physician under whom they are working.

d. Proactively inform the supervising physician or course director concerns about levels of supervision (excessive or sub-standard).

Responsibilities.

a. The supervisor and/or Course Director is responsible for ensuring that this policy is followed and that all individuals who interact with the learner are appropriately trained and credentialed for the patient care interaction.

b. Course Directors define the expected level of patient interaction expected of students.

c. Foundation Phase, Application and Individualization Phase Committees: Review and approval of course specific level of expected level of patient interaction expected of students for their level of training.

d. Medical Students: Will be aware of the details of this policy and will identify and assist in rectifying any concerns about clinical supervision.

PROCEDURE(S):

Reporting Concerns

a. Any student who is concerned about the level of supervision they are receiving should address their concerns as soon as possible with the supervisor and/or course director. Any student who is dissatisfied with the outcome of such a report should report their concerns to the campus director and/or the Assistant Dean of Clinical Education.

b. Expressions of concern will be held in strict confidence if possible. However, this may not be possible in situations where student or patient safety may be compromised, illegal activities may have occurred, or other situations needing immediate contact with reporting individuals.

Monitoring
a. **Course Directors** provide annual report to the appropriate Phase Committee on how they are assuring that students are receiving the appropriate level of clinical supervision within their course

b. **Students** report on end of course questionnaires whether clinical supervision was appropriate

c. **Education Committee**: Review questionnaire data to identify any ongoing concerns with clinical supervision and report on consistent problem identified by student reporting. Review report of Foundation Phase, Application Phase and Individualization Committees on how they are assuring that students are receiving the appropriate level of clinical supervision.