On January 9, 2013, Policy Name: Supervision of Medical Trainees

Application/Scope: Medical Students, Physician Assistant Students, and Postgraduate trainees

Approved (Date): FPGME Executive Committee July 30, 2013
MPAS Program Committee, August 15, 2013

Review Date: September 10, 2015

Revised (Date):

Approved By: Dean’s Council & Faculty Executive Council: September 10, 2013

BACKGROUND
Medical students, physician assistant students and postgraduate trainees must be given opportunities to observe and actively participate in clinical interactions to acquire the knowledge, skills, behaviours, attitudes and judgment required for future practice. This occurs through a process of graduated responsibility, whereby learners are expected to assume increased responsibility as they acquire greater competence. For this to occur safely, supervisors must assess the competencies of the students and postgraduate trainees they are supervising on an ongoing basis.

The following general principles apply to all medical education within the Faculty of Medicine:
- Safe, quality patient care must always take priority over the educational endeavour.
- Proper education optimizes patient care, as well as the educational experience.
- The autonomy and personal dignity of students and patients must be respected.
- Professionalism, which includes demonstration of compassion, service, altruism, and trustworthiness, is essential in all interactions in the educational environment in order to provide the best quality care to patients.

DEFINITIONS

PGME - Postgraduate Medical Education

UGME - Undergraduate Medical Education

WRHA - Winnipeg Regional Health Authority

Clerk or Clinical Clerk - is a medical student in year 3 or 4 of training, called Clerkship.

Clinical Clerkship Rotations - are hospital and/or ambulatory/outpatient encounters that involves patient care for which students participate for a specified time period during their third and fourth year of undergraduate medical school.

Medical Staff - comprised of all physicians, dentists, psychologists, midwives, physician assistants, clinical assistants and trainees appointed pursuant to the WRHA/RHA By-law #3 Medical Staff.
**Member** - means a member of the Medical Staff whether Active, Associate or Trainee.

**Trainee** - is any undergraduate, graduate, postgraduate or continuing education student participating in a training program of an accredited university based in one or more of the training sites and who is appropriately licensed by the College of Physicians and Surgeons of Manitoba (CPSM) or other applicable licensing authority.

**Physician Assistant Student** - is a student registered in the Master of Physician Assistant Studies (MPAS) Program.

**Resident** - is a postgraduate trainee who has obtained a Doctorate of Medicine (MD) and has an educational or a general licence from the College of Physicians and Surgeons of Manitoba (CPSM). A resident is in a specific Residency Program under the authority of the Associate Dean, PGME. The abbreviation PGY1 means post-graduate year one, i.e. the resident is in the first year of his/her postgraduate training program. Similarly with PGY2, PGY3, etc.

**Graded Responsibility** – is 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.

**Clinical Supervisor** – is the physician to whom the resident reports during a given interval of time, such as an on-call shift. Postgraduate trainees or fellows often serve in the role of supervisors, but they do not act as the most responsible provider for patient care.

**Provider of Record/Most Responsible Provider** – is the practitioner who has final accountability for the medical care of a patient when the trainee 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 and supervision of the learner, and would be expected to come in if the need arose.

### 1. PURPOSE

1.1 Clarify the roles and responsibilities of trainee staff, i.e. postgraduate trainees, physician assistant students, and medical students while engaged in clinical activities for educational purposes, to ensure participation in clinical activities appropriate to their level of education, training and abilities.

1.2 Clarify the roles and responsibilities of supervising physicians to ensure that postgraduate trainees, physician assistant students, and medical students are provided with appropriate supervision.

1.3 Ensure the safety and proper care of patients in educational settings.

### 2. STATEMENT OF POLICY

2.1 Prequalification clinical students must be enrolled on the Educational Register of the College of Physicians and Surgeons of Manitoba (CPSM). This includes medical students and physician assistant students enrolled in the University of Manitoba, and medical graduates who do not yet qualify for registration.
2.2 A person registered on the Educational Register is entitled to practise in an approved program but only under the supervision of the medical staff of that program.

2.2.1 A member of the Trainee Staff assumes all the duties and responsibilities of an Active Staff member.

2.2.2 Supervision may be direct or remote supervision, depending on the trainee’s level of competence and individual pace of achievement as determined by the preceptor.

2.3 Before having any patient contact, all trainees engaging in clinical medical educational activities must have an identified supervising physician who is licensed in the province of Manitoba and has Active, Associate, Term or Locum Staff privileges.

2.4 The learner and the supervising physician must ensure that a learner's status is clearly indicated to patients and hospital staff and to ensure that consent has been obtained from patients for any activities of the learner.

2.5 All Trainees engaging in clinical medical educational activities must wear appropriate identification that clearly designates their level of training in all encounters with patients and staff.

2.5.1 Pre-Clerkship and Clerkship medical students and Physician Assistant students will be addressed as Mr., Mrs., Miss, or Ms., as appropriate.

2.5.2 Postgraduate trainees will be introduced or addressed as “Doctor”.

2.6 Documentation in the Health Record may be designated to trainees as prescribed by respective training programs.

2.6.1 Trainees must indicate their designation after their entry.

2.7 The Clinical Supervisor is responsible for the quality of history and physical, order writing, progress notes and operative notes, ensuring that any documentation designated to a medical trainee is accurate, succinct and completed on time.

2.8 The Clinical Supervisor is responsible for all actions of all trainees.

2.8.1 The final responsibility for any medical acts performed by trainees rests with their supervising physician.

2.9 Learner placement affiliation agreements with clinical teaching sites must be in place and supervision of the learners (Appendix 1 - U of M/Regional Health Authority Sample Agreement).

2.9.1 Medical Students and Physician Assistant students must sign and abide by Schedule “A”, The Learner Practicum Agreement, agreeing to not under-take or perform any task outside the scope of the responsibilities specifically assigned to them.

2.9.2 Medical students and Physician Assistant students must immediately inform their supervisor if they believe an assigned task is beyond their level of ability or learning.

2.10 The University of Manitoba, Faculty of Medicine recognizes the inherent conflict of interest potential and the difficulties that arise when a close relative is involved in the supervision and/or evaluation of another close relative in the learner role. The University of Manitoba
recognizes a close relative as any parent, child, spouse, grandparent, sibling, in-law, or any person living in the same dwelling unit.

2.10.1 No faculty member should supervise or evaluate a close relative or other person with whom they have a close personal relationship, in the performance of their academic or clinical roles, except during occasional supervision of on-call duties, if the latter cannot be avoided.

2.10.2 Faculty must remain sensitive to all potential conflicts of interest with regards to supervision and deal with them in a professional manner.

### 3. PROCEDURES

#### SUMMARY OF DUTIES OF TRAINEES

<table>
<thead>
<tr>
<th>APPROVED DUTIES</th>
<th>MEDICAL STUDENT In PRE-CLERKSHIP</th>
<th>MEDICAL STUDENT in CLERKSHIP</th>
<th>(MPAS) PHYSICIAN ASSISTANT STUDENTS</th>
<th>RESIDENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>History &amp; physical</td>
<td>Yes, countersigned by supervising MD</td>
<td>Yes, countersigned by supervising MD</td>
<td>Yes, countersigned by supervising MD</td>
<td>Yes</td>
</tr>
<tr>
<td>Progress notes in patient chart</td>
<td>Yes; with designation after their entry</td>
<td>Yes; with designation after their entry</td>
<td>Yes; with designation after their entry</td>
<td>Yes; with designation after their entry</td>
</tr>
<tr>
<td>Medical orders: written or telephone</td>
<td>No</td>
<td>Yes, countersigned by supervising MD</td>
<td>Year 1 – No; Year 2 - Yes, countersigned by supervising MD</td>
<td>Yes</td>
</tr>
<tr>
<td>Submit prescription to Outpatient Pharmacy</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>Yes - Only postgraduate trainees who have a full licence or have completed 18 months of residency, passed their Medical Council of Canada, MCCQE II exam, and attended the PGME Core Curriculum Prescription Writing Course. Otherwise, prescription must be countersigned by supervising MD</td>
</tr>
<tr>
<td>Operative reports</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>Yes, countersigned by supervising MD</td>
</tr>
<tr>
<td>Discharge summary</td>
<td>No</td>
<td>Yes, countersigned by supervising MD</td>
<td>Year 1 – No; Year 2 - Yes, countersigned by supervising MD</td>
<td>Yes</td>
</tr>
<tr>
<td>Death certificate</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Forms for Home Care or long term care facility</td>
<td>No</td>
<td>Yes, countersigned by supervising MD</td>
<td>Year 1 – No; Year 2 - Yes, countersigned by supervising MD</td>
<td>Yes</td>
</tr>
</tbody>
</table>

3.1 With respect to **Medical Students** the following apply:

3.1.1 Medical students must wear proper identification at all times while working in clinical care units. This is defined as a University of Manitoba student photo ID badge.
3.1.1.1 Medical students are not licensed physicians and shall not be introduced or addressed as ‘Doctor’. Medical students will be addressed as Mr., Ms., or Miss, as appropriate.

3.1.2 At the discretion of the Supervising Physician, 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.

3.1.3 Medical students are not permitted to submit prescriptions to a pharmacist.

3.1.4 Medical students may not complete death certificates.

3.1.5 With respect to Pre-Clerkship (Years 1 - 2), the following apply:

3.1.5.1 Pre-Clerkship medical students may not write medical orders of any kind.

3.1.5.2 Pre-Clerkship medical students may not complete forms for application to long term care facilities or the Home Care Program.

3.1.6 With respect to the Clerkship (Year 3 - 4), the following apply:

3.1.6.1 At the discretion of the Supervising Physician, and guided by the principles of graded responsibility, a Clerk may carry out technical procedures on patients under direct or remote supervision of a licensed physician, 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 physician who is responsible for the care of the patient.

3.1.6.2 Clerks may write or give orders concerning investigation or treatment of a patient. However, these orders cannot be executed until they have been reviewed and countersigned by a licensed physician. A licensed physician may be either a resident or a Supervising Physician who holds Active, Associate, Term or Locum privileges.

3.1.6.3 Medical students at the Clerkship level are not permitted to submit prescriptions to a pharmacist.

3.1.6.4 Medical students at the Clerkship level may not complete death certificates.

3.1.6.5 Medical students at the Clerkship level may complete forms for application to a long-term facility or to the Home Care Program, but these forms must be reviewed and countersigned by a licensed physician.

3.2 With respect to Physician Assistant Students, the following apply:

3.2.1 Physician Assistant students must wear proper identification at all times while working in clinical care units. This is defined as a University of Manitoba student photo ID badge.

3.2.1.1 Physician Assistant students are not licensed physicians and shall not be introduced or addressed as ‘Doctor’. Physician Assistant students should be addressed as Mr., Ms., or Miss, as appropriate.
3.2.2 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.

3.2.3 Physician Assistant students are not permitted to submit prescriptions to a pharmacist.

3.2.4 Physician Assistant students may not complete death certificates.

3.2.5 With respect to **Year I Physician Assistant Students**, the following apply:

- 3.2.5.1 Year I Physician Assistants students may not write medical orders of any kind.
- 3.2.5.2 Year I Physician Assistants students may not complete forms for application to long term care facilities or the Home Care Program.

3.2.6 With respect to **Year II Physician Assistant Students**, the following apply:

- 3.2.6.1 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 direct or remote supervision of a licensed physician, depending on the 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 physician who is responsible for the care of the patient.
- 3.2.6.2 Year II Physician Assistant students may write or give orders concerning investigation or treatment of a patient, however these orders cannot be executed until they have been reviewed and countersigned by a licensed physician. A licensed physician may be either a Resident or a Supervising Physician who holds Active, Associate, Term or Locum privileges.
- 3.2.6.3 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 (as defined in previous section).
- 3.2.6.4 Year II Physician Assistant students may complete forms for application to a long-term care facility or the Home Care Program, but these forms must be reviewed and countersigned by a licensed physician.

3.3 With respect to **Postgraduate Trainees**, the following apply:

- 3.3.1 Postgraduate trainees should wear proper identification while working in clinical care units. This is defined as a Winnipeg Regional Health Authority (WRHA) Photo ID badge.
- 3.3.2 Postgraduate trainees shall be introduced or addressed as 'Doctor'.
- 3.3.3 At the discretion of the supervising physician, Postgraduate trainees 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.
- 3.3.4 At the discretion of the supervising physician, and guided by the principles of graded responsibility, a resident may carry out technical procedures on patients under 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 physician who is responsible for the care of the patient.

3.3.5 Postgraduate trainees 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 his/her resident, that he/she 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.

3.3.6 Postgraduate trainees are permitted to submit prescriptions to a pharmacist.

3.3.7 Postgraduate trainees cannot complete death certificates.

3.3.8 Postgraduate trainees may complete forms for application to a long term care facility or the Home Care Program. These forms do not require counter signature by a licensed physician.

3.4 With respect to Physician Supervision of Medical Trainees, the following apply:

3.4.1 The Supervising Physician must provide appropriate supervision to the trainee. This includes the following:

3.4.1.1 Ensuring the learner to whom he/she is delegating has the appropriate skills, knowledge and judgement to perform the delegated act and that an appropriate level of supervision is provided

3.4.1.2 Being willing and able to see or provide assistance with management of patients under his/her care when action is requested by a trainee

3.4.1.3 Ensuring ongoing, timely evaluation of the trainee to determine their clinical competence and educational requirements

3.4.1.4 Meeting regularly with the trainee to discuss his/her assessment, management and documentation of patient care and to provide timely formative and summative feedback

3.4.1.5 Reporting to the respective Residency Program Director when a trainee exhibits behaviours that would suggest incompetence or incapacity; fails to behave in a professional or ethical manner or otherwise engages in inappropriate behaviour.

3.4.1.6 Maintaining a professional supervisor-trainee relationship with no exploitation of the power differential inherent in the relationship and no intimidation or harassment.

3.4.2 Preceptors should closely observe trainees in their clinical interactions with patients. When the Supervisor is satisfied with the level of education and demonstrated expertise of the trainee, they may be permitted to see patients alone.

3.4.3 Medical and Physician Assistant students may record histories, physicals and orders on the chart according to arrangements with the individual supervising attending staff physician. All signatures should be further identified with the words "Med Student" or "Physician Assistant Student".

3.4.4 The supervising physician, or his/her resident physician delegate, must review and countersign all documentation by Medical Students and Physician Assistant Students including the following:
3.4.4.1 A patient's history, physical examination, diagnosis and progress in hospital in a timely manner.

3.4.4.2 All transcribed orders concerning the investigation or treatment of a patient.

3.4.5 Postgraduate trainees may dictate reports, document on the chart and write orders according to arrangements with the individual supervising attending staff physician. Counter-signatures are not required.

3.4.6 In circumstances where the resident is no longer available, the supervising attending staff physician is responsible to complete all documentation and signatures.

POLICY CONTACTS: Associate Deans, Undergraduate Medical Education, Postgraduate Medical Education, and Program Director, Master of Physician Assistant Program

REFERENCES

1. University of Manitoba Policy: Conflict Of Interest Between Evaluators And Students Due To Close Personal Relationships
   http://umanitoba.ca/admin/governance/governing_documents/students/277.html

2. WRHA Board By-law No. 3, Medical Staff, May 30. 2012

3. WRHA and PARIM Collective Agreement;

4. College of Physicians and Surgeons of Manitoba Categories of Registration
   http://cpsm.mb.ca/registration/categories-of-registration

5. Master of Physician Assistant Program website
   http://umanitoba.ca/faculties/medicine/education/paep/curr_student/3881.html

6. Health Sciences Centre Policies:
   - Standards For Inpatient Health Record Documentation By Medical Staff---80.110.011
   - Documentation: Entries Into The Health Record---80.115.011
   - Standards For Medical Consultations---80.110.010

7. College of Physicians and Surgeons of Ontario, Policy Statements:
   - #1-12 Professional Responsibilities in Undergraduate Medical Education, May 2012
     http://www.cpso.on.ca/uploadedFiles/policies/policies/policyitems/profrespUG.pdf

8. University of Ottawa Post Graduate Medical Education Policy: Policy on the Potential Conflict Of Interest During Clinical Supervision Due To A Personal Relationship
APPENDIX 1: Sample U of M & Regional Health Authority (RHA) Learner Agreement

AFFILIATION AGREEMENT - LEARNER PLACEMENTS

Article 5: University Responsibilities

5.01 During the term of this Agreement the UNIVERSITY shall, to the best of its abilities, recognizing that it may not have staff on-site at the RHA or the CLINIC(S):

k) While retaining overall responsibility for the education, training and supervision of the Learners, to coordinate with the RHA and the CLINIC(S) to share responsibility to instruct, evaluate and supervise the Learners during the Practicum within the context of the regular operation of the area in which the Practicum is occurring;

5.06 Any of the RHA or the CLINIC(S) shall have the right to intervene and to take necessary action should a Learner member be functioning in a manner considered by any of the RHA or the CLINIC(S) to be a serious potential risk to the well-being of a patient or materially contrary to the party’s regulations, rules, policies or procedures, or contrary to PHIA. The concerned party, in consultation with the UNIVERSITY, will determine if a Learner or a supervising UNIVERSITY staff member should be prohibited from the Facility and shall notify the UNIVERSITY of its decision.

Article 6: The RHA and the CLINIC(S) Responsibilities

6.01 During the term of this Agreement the RHA and each of the CLINIC(S) shall:

f) While recognizing that the general responsibility for the education, training and supervision of the Learners rests with the UNIVERSITY, accept responsibility to instruct, evaluate and supervise the Learners during the Practicum within the context of the regular operation of the area in which the Practicum is occurring;

Article 7: Joint Responsibilities

7.02 The parties shall coordinate their efforts to ensure that Learners, throughout their Practicum, are at a minimum supervised in the manner and to the extent required by any relevant professional governing body and any relevant accrediting agency. The learning environment includes formal learning activities as well as attitudes, values, and informal “lessons” conveyed by individuals with whom the Learner comes into contact. In the case of the Faculty of Medicine, the UNIVERSITY will provide “professionalism handbook” to assist with the assessment of its Learners’ informal training.

Schedule “A”
LEARNER PRACTICUM AGREEMENT

By signing this Agreement, I agree to the following:

5. I will be assigned patient/client care or service responsibilities only to the degree commensurate with my level of ability, and optimum learning will be provided without diminishing the quality of patient/client care or service. I will not under-take or perform any task which is outside the scope of the responsibilities specifically assigned to me. If I believe a task is beyond my level of ability or learning, I will immediately inform my supervisor.