

Policy Name: 9.03.01 Medical Student Supervision Policy**Policy**

The University of Texas at Tyler School of Medicine (UT Tyler SOM) bases the medical student supervision policy on LCME Standard 9.3 for the Clinical Supervision of Medical Students, which states the following:

“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 the student’s level of training, and that the activities supervised are within the scope of practice of the supervising health professional.

Definitions:

Faculty physicians are practicing physicians in a good standing on the medical staff of the UT Tyler SOM or clinicians in a University of Texas at Tyler approved clinical site and holding a University of Texas at Tyler faculty appointment.

Clinical designee are resident physicians (e.g., interns, residents, and fellows) and licensed independent practitioners (e.g., nurses, nurse practitioners, physician assistants, nurse midwives, and nurse anesthetists).

A faculty member or designee will provide appropriate clinical supervision while participating in all required and elective clerkships and rotations. Faculty physicians and designees are ultimately responsible for the patient’s care. The UT Tyler SOM will ensure all persons who teach, supervise, and/or assess medical students are adequately prepared for those responsibilities. The policy will be distributed to, and an attestation of understanding will be required from all clinical faculty, designees, and medical students annually.

Qualified physicians in good standing on the medical staff of the UT Tyler SOM or a University of Texas at Tyler approved clinical site and holding a University of Texas at Tyler faculty appointment may serve as clinical supervisors to engage in teaching, clinical supervision, and evaluation of students. Approved designees include resident physicians (e.g., interns, residents, and fellows) and licensed independent practitioners (e.g., nurses, nurse practitioners, physician assistants, nurse midwives, and nurse anesthetists).

Medical students are defined as students actively enrolled in the UT Tyler SOM as candidates for the MD degree who are participating in approved clinical rotations and clerkships, as well as students accepted through the AAMC Visiting Student Learning Opportunities™ (VSLO®) or other approved SOM medical student exchange programs. Medical students participating in away rotations shall be subject to and must adhere to the supervision policy of the host institution.

Clinical sites approved by the UT Tyler SOM are responsible for assuring the healthcare providers employed at their site are appropriately trained, certified, and credentialed consistent with applicable regulations and industry standards.

Policy Name: 9.03.01 Medical Student Supervision Policy

In accordance with LCME Standard 9.1, UT Tyler SOM faculty and designees in the medical education program are expected to be familiar with the learning objectives of the course or clerkship and are prepared for their roles in teaching and assessment. The school will provide resources to enhance teaching and assessment skills and will centrally monitor participation in those opportunities. A 360-degree evaluation framework of required skills will provide objective assessment and documentation of skills to determine graduated levels of participation during clinical training. This framework and progression will be based on the UT Tyler SOM Medical Education Program Objectives (MEPOs) and the Association of American Medical Colleges (AAMC) Entrustable Professional Activities (EPAs) for entering residency. All medical students must be under direct supervision for all clinical activities initially. As students develop documented competency in clinical skills under direct supervision, the clinical supervisor may decide to allow a student to perform more independently under indirect supervision with direct supervision immediately available if the patient consents.

Medical students are expected to assume developmentally appropriate, graduated levels of responsibility during their training all while being directly and/or indirectly supervised as appropriate. The degree of involvement/participation of students when providing patient care will be based on several factors, including but not limited to:

- The developmental level of the student
- The complexity of the care of the procedure
- The potential for adverse effects
- The demonstrated competence, maturity, and responsibility of each student
- The consent of the patient to have a student involved in their care

Levels of supervision are defined as follows:

- **Direct:** The supervising faculty member or designee is physically present with the medical student and the patient.
- **Indirect Supervision with Direct Supervision Immediately Available:** The supervising faculty member or designee is physically present at the clinical site and is immediately available to provide direct supervision. The supervisor may not be engaged in activities which would delay his/her response to a student requiring direct supervision.
- **Oversight:** The supervising faculty member or designee is available to provide review of encounters and provide feedback after care is delivered. Oversight is not appropriate for medical students.
- Supervision via telephone or electronic modalities is not appropriate for medical students.

Medical students are always expected to take responsibility for their actions and be accountable for prioritizing the best interest of the patient. Students must recognize their own limitations and request assistance or decline participation in any aspect of patient care for which they do not feel comfortable or competent. Students should always use their best judgment to discern what is safest and best for the patient without fear of any consequences related to their evaluation, assessment, or advancement. At the conclusion of each clerkship and clinical elective, students will indicate on the clerkship evaluation form whether they were appropriately supervised throughout their clinical work. For required clerkships, annual review will include assurance that

Policy Name: 9.03.01 Medical Student Supervision Policy

all non-faculty instructors are acting within their scope of practice when serving in a supervisory role.

The supervising faculty, designees, and medical students' responsibility is to ensure compliance with this policy. Ultimately the supervising faculty member will make the determination of the level of involvement/participation each student should have when providing patient care in a clinical learning environment and is responsible for the patient outcomes.

Medical student activities may not be billed except as permitted by CMS regulations. It is the responsibility of the supervising health professional to assure compliance with all local, state, and federal guidelines regarding the provision of care, as well as documentation and billing for services provided by the appropriately licensed and/or credentialed professional.

Faculty and designees will be instructed to review the Medical Student Supervision Policy website via email announcement annually. Medical students will be given this policy during their orientation to Phase 2.

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