

Policy Name:	Medical Student Supervision & Level of Responsibility
Original Approval Date:	09-18-2020
Approving Officer/Committee:	Medical Curriculum Council
Revision Dates and Notes:	4-16-2021
Related LCME Element(s) (if any):	9.3

A. Policy – Medical students should be provided with appropriate levels of supervision as they progress through their education towards a career in patient care. A supervising preceptor will ensure that medical students are provided with opportunities to learn that are progressive and commensurate with the student’s level of learning.

B. Purpose - 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.

C. Scope – This policy applies to students in all courses at all training sites.

D. Procedure/Process –

DEFINITIONS

- **Supervising Physician** - An attending physician with a LSUHSC-S faculty appointment; a resident or fellow physician training in a graduate medical education program at, or affiliated with, the School of Medicine.
- **Healthcare Provider** - Including but not limited to: anesthesia assistants, dieticians, emergency medical technicians, medical sonographers, medical technologists, nurse practitioners, nurses, occupational therapists, paramedics, pharmacologists, physical therapists, physician assistants, psychologists, radiographers, respiratory therapists, social workers, speech language pathologists, and surgical technicians.

POLICY

Medical students cannot provide unsupervised patient care. Clinical decisions and orders are never created or enacted by medical students without a supervising physician’s input and approval. A supervising physician has the medical and legal responsibility for patient care at all times. Student may be supervised at one of two broad levels as determined by the supervisor:

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Direct Supervision - the supervising physician is physically present with the medical student and patient.

Indirect Supervision - the supervising physician is physically within the hospital or other site of patient care and is immediately available to provide direct supervision.

Students on duty must have rapid and reliable systems for communicating with their supervising faculty and resident physicians.

Determination of appropriate level of supervision is made by the supervisor, based on many factors, including:

- complexity of the situation or procedure
- acuity of activity and level of risk to patient
- medical student's level of training, demonstrated competence, maturity, and responsibility.

For "Level of Supervision" the LSUHSC-S School of Medicine has adopted the Ottawa scale, as follows:

1- Observes	2- Practices	3- Performs	4- Manages
Required complete faculty guidance	Required hands-on direction throughout task	Required intermittent direction	Functioned fairly independently

Adapted from: Rekman, J., Hamstra, S. J., Dudek, N., Wood, T., Seabrook, C., & Gofton, W. (2016). A New Instrument for Assessing Resident Competence in Surgical Clinic: The Ottawa Clinic Assessment Tool. *Journal of Surgical Education*, 73(4), 575-582.

It is the faculty supervisor's role to ensure that any non-physicians who are engaged in clinical teaching for supervising any student are acting within their scope of practice.

The Course/clerkship director is responsible for determining the types of patient interactions and the clinical procedures that medical students can perform during patient care experiences and the levels of direct supervision required for these interactions and procedures.

The Clerkship director will provide faculty, resident physicians, and students with a list of the types of patient interactions and clinical procedures that students may perform, and the level of direct supervision required for each of them.

A supervising physician may delegate some medical student teaching and supervising responsibilities to non-physician care providers after ensuring the non-physician providers are appropriately credentialed and working within the scope of their practice. Medical students are expected to maintain self-awareness of their own competence and seek assistance/advice when clarification is needed; 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; proactively inform the supervising physician or course director about concerns related to levels of supervision (excessive or sub-standard).

Reporting Concerns

Individuals who have experienced or witnessed a lapse in medical student supervision must report the incident to the course/clerkship director. Students are encouraged to relay instances in which they feel they have not received appropriate supervision as soon as possible to the course/clerkship director. Students will be asked at each mid-clerkship evaluation about any instances in which they were concerned about the level of their supervision. Students may also anonymously report lapses in medical student supervision in the course evaluation.

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.

Course directors are to inform the Associate Dean for Academic Affairs of instances in which student concerns are raised.

Monitoring

The Associate Dean for Academic Affairs reviews all reports of inappropriate supervision and ensures adequate and timely resolution in cooperation with the relevant clerkship director(s).

The Medical Curriculum Council receives a summary of all such occurrences annually to identify and act upon recurrent concerns. It also reviews the Annual Clerkship Director's Report to ensure that adequate procedures are in place to ensure appropriate supervision.