

**UNIVERSITY OF HOUSTON
COLLEGE OF MEDICINE
ADMINISTRATIVE MEMORANDUM**

SUBJECT: Clinical Supervision Policy

I. PURPOSE AND SCOPE

- A. To ensure that medical students in clinical learning situations involving patient care are appropriately supervised at all times, in order to ensure patient and student safety.
- B. To ensure that the level of responsibility delegated to the student is appropriate to his or her level of training, with a progressively increasing level of responsibility.
- C. To ensure that the activities supervised are within the scope of practice of the supervising health professional.
- D. To ensure the UH College of Medicine complies the Liaison Committee on Medical Education (LCME) standards for the medical education program, including LCME Standard 9.3

II. BACKGROUND

Meaningful involvement in patient care is critical to medical student education and training. This must be accomplished in a way that ensures patient and student safety and is at the appropriate level of responsibility for each individual student.

III. POLICY

A. Supervision in Clinical Care

1. Medical students are never permitted to be the sole provider of care and must be supervised at all times by licensed providers practicing within their scope of practice.
2. When a medical student is being supervised by a resident, fellow, or other health care professional who is providing care with their own supervising physician (e.g., physician assistant), it is the responsibility of the supervising physician to ensure that the resident or other health care professional is prepared and aware of how to teach and supervise a medical student appropriately.
3. The amount of direct supervision and observation required in each patient encounter will vary based on the clinical situation, the student's experience, skill, and maturity, as well as the specific rotation, and the student's progress through the University of Houston College of Houston curriculum.
4. Medical students are never permitted to be the sole in-house provider of care.
5. Medical student participation in clinical procedures requires direct supervision by the supervising physician or health care professional. The supervising physician or health care professional must have the privileges and authorization to perform the procedure, and patient consent must be obtained prior to the clinical procedure, per standard procedures.
6. Assisting in or performing clinical procedures may only be performed when the supervising physician or health care professional agrees that the student has achieved the required level of competence, maturity, and responsibility to perform the clinical procedure.

B. Dissemination and Education Related to This Policy

All orientation to all components of the curriculum will include content outlining:

1. The appropriate level of student responsibility in the clinical settings to which the students will be assigned.
2. The appropriate level of clinical supervision required in the clinical settings to which

the students will be assigned, including supervision by residents, fellows, faculty, and other health care professionals.

3. Explicit guidelines stating that faculty, residents, and other health care professionals are not allowed to supervise medical students in areas of practice that are outside their own scope of practice.
 4. Explicit instructions for reporting if a student feels that he/she is in or will be in a situation with an inappropriate level of responsibility or supervision.
These reporting instructions will include, at a minimum:
 - a) Means to contact and discuss the situation with the Course/Clerkship Director and Site Director/Primary Preceptor.
 - b) Means to contact and discuss the situation with the Associate Dean for Student Affairs.
 - c) Instructions for submission of a mistreatment report (anonymously or not).
- C. All courses and clerkships with clinical experiences that involve patients will include in their student orientation: Syllabi, learning management system website, faculty/resident orientation and faculty/resident materials, and content outlining:
1. The appropriate level of student responsibility in the clinical settings to which students will be assigned.
 2. The appropriate level of clinical supervision required in the clinical settings to which students will be assigned, including supervision by residents, fellows, faculty, and other health care professionals.
 3. Explicit guidelines stating that faculty, residents, and other health care professionals are not allowed to supervise medical students in areas of practice that are outside their own scope of practice.
 4. Explicit instructions for reporting if a student feels that he/she is in or will be in a situation with an inappropriate level of responsibility or supervision.
These reporting instructions will include, at a minimum:
 - a) Means to contact and discuss the situation with the Course/Clerkship Director and Site Director/Primary Preceptor.
 - b) Means to contact and discuss the situation with the Associate Dean for Medical Education.
 - c) Instructions for submission of mistreatment report (anonymously or not).

IV. MONITORING OF THIS POLICY

- A. For courses/clerkships with clinical components, End of Course/Clerkship evaluations will ask the student if he/she had an appropriate level of clinical supervision. Additional questions will ask if the student had clinical responsibilities appropriate to the specific course/clerkship. The AAMC Graduation Questionnaire will be reviewed annually.
- B. The compiled results of these questions will be included in the outcome data reports given to Course/Clerkship Directors, Department Chairs, the Curriculum Committee and its subcommittees, as appropriate.
- C. The parties who receive these reports will have the responsibility for reviewing, analyzing, and acting as appropriate.
- D. If a significant concern is identified through any avenue, the faculty, Course/Clerkship Director, Associate Dean for Medical Education, or other person who receives the information is responsible for notifying the Course/Clerkship Director, who will address identified problem as appropriate, and notify the Associate Dean for Medical Education as appropriate.
- E. The Course/Clerkship Director must notify the Associate Dean for Medical Education if there is any repeat violation of this policy by the same faculty or resident, or at the same

- site.
- F. In the event of a violation reported to the Course/Clerkship Director or Associate Dean for Medical Education, the Course/Clerkship Director or Associate Dean for Medical Education, or his/her designee, will investigate the circumstances of the violation to determine if the violation represents a systemic problem or a situation unique to the student. If the investigation reveals a problem in the system, the Course/Clerkship Director or Associate Dean for Medical Education, or his/her designee will work with the course/clerkship, department, and/or program to make changes in the system to rectify the problem. If the investigation reveals a situation unique to the student, the Course/Clerkship Director or Associate Dean for Medical Education, or his/her designee will discuss the situation with the supervising physician or professional, Course/Clerkship Director, Chair, and/or Program Director, and counsel him/her, as necessary, to prevent further violations.
- G. The Course/Clerkship Director and/or the Associate Dean for Medical Education will discuss violations with the Chair and/or Program Director at the clinical site, and the clinical site will have to develop an appropriate plan of action to prevent any further violations of the policy. Inadequate response to violations will result in termination of continued teaching responsibilities by the faculty, resident, professional, or clinical site.

Approval History		
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Review by UH Office of General Counsel	Pending	

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