

Applies To: Prospective Students

Date of Revision: 6/15/2023

BACKGROUND: ARC-PA Standard 3.14 states *the program must make student admission decisions in accordance with clearly defined and published practices of the institution and program.*

PURPOSE: To ensure compliance with ARC-PA standard 3.14, the CMU PA program will clearly define and publish the practices used to make student admission decisions.

POLICY: To ensure fair and equitable admissions for all prospective students, the Central Michigan University PA Program's Admissions Committee has established a scored, yet holistic, approach to the process of admissions. This process ensures that students admitted into the CMU PA Program will have the potential to be academically successful and complete the program to become compassionate and competent Physician Assistants.

PROCEDURE: The CMU PA Admissions Committee is comprised on faculty, preceptors, community physician assistants and physicians, and CMU PA Program alumni. The admissions committee also receives support from the College of Health Professions Office of Graduate Admissions.

The prerequisites for admission into the CMU PA program are:

- A completed bachelor's degree from a regionally accredited college/university or appropriate international institution
- A minimum cumulative grade point average of 3.0
- A minimum grade point average of 3.0 in every prerequisite course
- A minimum of 500 hours of paid direct patient care experience
- Three completed letters of reference
- One semester on anatomy lecture with lab
- One semester of physiology lecture with lab
- One semester of pathophysiology
- One semester of microbiology with or without lab
- One semester of biochemistry with or without lab
- One semester of developmental psychology (from birth through old age)

The CMU PA program participates in the Centralized Application Service for Physician Assistants (CASPA). All documents must be submitted into CASPA by the application deadline of September 1st. All prerequisites and bachelor's degree must be completed prior to matriculation.

The program's admissions committee along with program faculty, preceptors, CMU PA Program alumni, and community physician assistants and physicians will assist in the applicant selection process. Each completed application is evaluated and scored for established criteria that include: 1) academic performance, 2) healthcare related experience, 3) personal attributes as recognized by three letters of reference, personal statements, volunteer experiences, and awards.



Admissions Policy

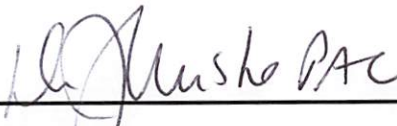
Any applicant not meeting the minimum standards are notified in writing at the completion of the initial review. Applicants that have attend CMU for their undergraduate degree and have maintained a minimum grade point average of 3.25 will be offered a formal interview. Additionally, the CMU PA Program agrees to interview up to four suitably qualified and duly enrolled full-time students from Northern Michigan University who meet all the admissions criteria but are not guaranteed admission. The CMU PA Program also agrees to interview up to two suitably qualified and duly enrolled full-time students from Lake Superior State University who meet all the admissions criteria but are not guaranteed admission. The CMU PA Program agrees to interview up to two suitably qualified and duly enrolled full-time students from Michigan Technological University who meet all the admissions criteria but are not guaranteed admission.

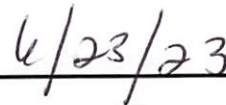
The purpose of the formal interview is to further assess personal attributes such as communication skills, emotional and intellectual maturity, and general knowledge of the PA profession and the responsibilities and skills it entails. The interviewee with complete two individual interviews, one group interview, and a writing sample. The scores generated from the initial application review and at the time of the interview are then calculated and each interviewee is ranked accordingly. After final review by the program director and the admissions committee, offers of admission are extended via email. Each applicant receives one of three emails explaining the results:

1. Program acceptance email
2. Program wait-list email
3. Program denial email

The Physician Assistant program will consider applicants who have completed advanced medical training but who are not already licensing to practice as a medical or osteopathic physician in the United States. Such applicants must demonstrate successful completion of prerequisite coursework or equivalents. Such applicants must also meet all other admission requirements and are required to demonstrate language proficiency by achieving a TOEFEL score of at least 600.

Approved by Faculty Executive Committee on 6/15/2023


Signature


Date



Classroom Visitor Policy

Applies To: Students

Date of Revision: April 11, 2023

BACKGROUND:

The CMU PA program recognizes that many of our students do have dependent children, spouses, or significant others along with family members and friends. However, the safety and confidentiality of our students along with proper care of our facilities is necessary.

PURPOSE:

To define who is allowed in our PA program facilities including the instructional classrooms and labs.

POLICY:

Students enrolled within the PA program, including didactic and clinical year, are not allowed to bring any children, dependents, spouses, friends, or family into the areas of instruction such as the classrooms or labs. This includes time after hours, group study times, and both instructional and non-instructional classroom/lab times

PROCEDURE:

If a student is found in violation of this policy, they will be referred to the Student Affairs Committee for possible disciplinary action.

Approved by Faculty Executive Committee on 4/11/2023

[Handwritten Signature]
Signature

6/23/23
Date

Applies To: Students

Date of Revision: April 11, 2023

BACKGROUND:

The PA program is very rigorous and therefore requires students to be extremely disciplined in their study habits to succeed. Part of their success depends upon seeing and hearing the materials taught. Therefore, attendance in the courses is paramount to that success.

PURPOSE:

To ensure that students do not miss any materials presented by professors thus getting the full experience of their training to assure their success.

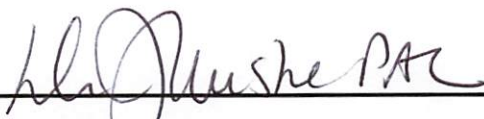
POLICY:

Classroom attendance is mandatory for all courses. This may occur virtually when a professor is not present or when the professor records a presentation. During such times of virtual presentations, students are still mandated to sign in online showing their full attendance. Missing classes may result in point deduction and or further discipline depending upon the frequency and reason for the absences. All in person instruction will require students to be in person, in the classroom, unless there is an excused absence.

PROCEDURE:

The student handbook outlines the mandating of attendance in all courses in the PA program either virtual or in person. Upon the need to miss a class, a written request via email must be sent to the instructor of record with copies to the **Didactic Education Director, Associate Program Director, and the Program Director**. If the absence is excused, no further action will be needed. If unexcused, a grade deduction will occur according to the course syllabus. Further unexcused absences will result in further grade deductions, a written warning, followed by a meeting with the instructor of record, the Didactic Education Director, the Associate Program Director, and the Program Director. If the unexcused absences are greater than two, the student will be referred to the Student Affairs Committee and Office of Student Conduct for further discipline. More than three unexcused absences from the classroom could result in dismissal from the program.

Approved by Faculty Executive Committee on April 11, 2023



Signature

6/23/23
Date



Didactic Year Advising Policy

Applies To: Faculty & Students

Date of Revision: June 18, 2023

BACKGROUND:

Advising PA students during their didactic year is paramount to their success in the program. Advising allows the student to learn their strengths and weaknesses and make appropriate changes necessary for successful coursework. Advising is needed to educate the student on study methods and habits and allows for referral to resources to aide in personal issues that could impact their progress in the CMU PA Program.

ARC-PA Standard A3.10 The program must define, publish, make readily available and consistently apply written procedures that provide for timely access and/or referral of students to services addressing personal issues which may impact their progress in the PA program.

PURPOSE:

The purpose of advising is to take notice of struggles the student may be having, evaluate any academic concerns, and identify any physical or mental difficulties. Advisors can point out and implement new study strategies and guide the student toward other forms of counsel as a way of strengthening their academic performance. They may also identify areas of improvement for self-care and overall well-being.

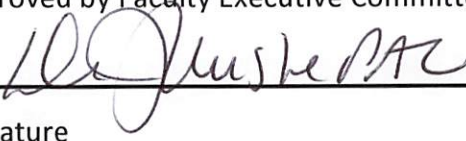
POLICY:

Students will meet with their assigned advisor twice during each semester. These advising sessions will be set and scheduled by the advisor and are strongly encouraged. Advisors will be available by appointment only for additional advising at the individual need of the student. All documentation of these meetings will take place in Typhon.

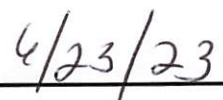
PROCEDURE:

At new-student orientation, students will be made aware of advising requirements. Furthermore, this information will be listed in the student handbook. Students will be given their assigned advisor within the first two weeks of Summer I semester. Advisors will schedule the first advisor/advisee meeting prior to midterms and again before their final exams. Advisors will also be available at other times throughout the semester at the student's request. All meetings will be documented in Typhon. If an advisor identifies an area of concern that will require referral for personal issues that could impact their progress in the PA Program, immediate referral and or information will be given to the student (ARC-PA standard A3.10). All areas of concern will be documented in Typhon, the Program Director will be notified, and further follow up scheduled.

Approved by Faculty Executive Committee on June 18, 2023



Signature



Date



HEALTH PROFESSIONS

PHYSICIAN ASSISTANT

CENTRAL MICHIGAN UNIVERSITY

Didactic Year Academic Policy

Applies To: Students

Date of Revision: April 11, 2023

BACKGROUND:

Assuring a minimum standard is the benchmark for clinical success. Monitoring student grades and averages at the end of each semester will assure the standard is met.

PURPOSE:

To establish and monitor minimum grade point average in the didactic portion of the PA Program. GPA and grades are a means to ensure student success in the program and beyond.

POLICY:

- All students in the PA program must maintain a 3.0-grade point average after each semester.
- All letter grades of C (70% minimum) will be reported to the Program Director, Didactic Education Director, student's Advisor, and Advanced Advisor for potential remediation.
- If a student's GPA falls below 3.0 at the end of any semester, that student will be placed on academic probation (per CMU Graduate Bulletin). The student will then have 2 semesters to regain a GPA of 3.0 or above.
- Failure to raise this average to 3.0 or above will result in the student decelerating for one year until course offerings occur again, and they can retake courses that were below the C standard.
- Should the student fail any course in the program (below a C), the student will have to decelerate and re-matriculate the following academic year to repeat the failed course.
- Failure to pass the course the second time or failure of a second course will result in **dismissal from the program and the student may not** reapply to the CMU PA program. Likewise, failure of two courses during any time in the PA program also results in dismissal and no opportunity for rematriculating.
- Students must pass all courses to progress in the program.
- To advance to the clinical year, the student must have a 3.0 GPA or higher by end of the summer semester prior to the clinical year. If they do not have the 3.0 GPA they will decelerate and retake courses that are below the standard to improve the GPA. They would then start the clinical year the following year.

In Summary, all letter grades of C or below must be reported to program director, didactic year director, advisor, and advanced advisor. Any **One-time** grade of F (below 70%), the student is decelerated to the next year to re-take that course. At the time of rematriculation, it is at the discretion of the Faculty Executive Committee that the student may audit further courses in that semester. Should the student fail the repeated course again, they will be dismissed from the program and cannot reapply to CMU PA program. Multiple failures of courses in a single semester will **result in dismissal** from the CMU PA Program. The dismissed student is not allowed to rematriculate and cannot re-apply to CMU PA program.

PROCEDURE:

It is the responsibility of the Instructor of Record to monitor all student's final grades. Any grade of C or less, the instructor of record will report the student and grade to the Program Director, Didactic Education Director, the student's Advisor, and the Advanced Advisor. Based on the recommendation of the Faculty Executive Committee, the student will be subject to deceleration or dismissal from the program.



Didactic Year Remediation Policy

Applies To: Students

Date of Revision: April 11, 2023

BACKGROUND:

The rigorousness of the PA program may potentially lead to a student failing a course. If this occurs, the student will have the opportunity to remediate the course to maintain the required GPA for advancement in the PA program.

PURPOSE:

To ensure student opportunity to remediate a course to better their understanding of the subject matter and improve their GPA to advance into the clinical phase of the program.

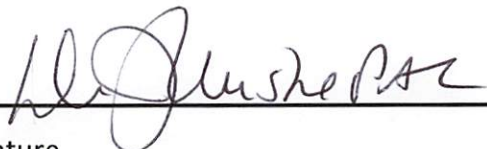
POLICY:

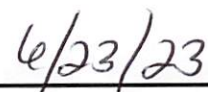
Any student who receives a failing grade in any of the didactic courses must be given the opportunity to remediate the course. Successful remediation will result in a maximum passing grade of C for the course. All remediation meetings with didactic students will be documented in Typhon.

PROCEDURE:

A failing grade in any didactic course needs to be reported to the Academic Coordinator and the Program Director. All professors, regardless of standing (adjunct, part time, full time etc.), will be responsible for helping in remediation of their student. Furthermore, professors may choose their individual form of remediation (research, additional written exam, practical exam, oral exam, etc.). Once the remediation is complete and all meetings documented in Typhon, and the exam is passed successfully, a maximum grade of 70% can be assigned to the student. Remediation is not a guaranteed replacement/improvement of the grade.

Approved by Faculty Executive Committee on April 11, 2023


Signature


Date



Applies To: Students

Date of Revision: April 11, 2023

BACKGROUND:

To ensure the integrity of the PA cohort and uphold PAEA and ARC-PA standards, all course examinations must occur simultaneously for all students.

DEFINITIONS:

Course examinations: any quiz, test, exam, mid-term, or final examination.

PURPOSE:

To ensure that students do not have access to examination materials after an examination is delivered, all students are required to take all forms of testing (quizzes, tests, exams, mid-terms, and final exams) at the same time. Exams taken prior to or after a scheduled time could potentially compromise the validity of the exam should a student either gain or give exam information to other students.

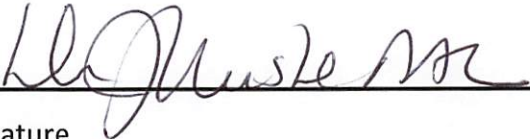
POLICY:

All tests of any kind as defined above shall be listed in the course syllabus on a scheduled timeline. All students taking a course are aware of testing dates and that they are required to attend the testing at the same time. Any student with an excused absence on test day will need to submit their reasoning to the instructor of record, the program associate director, program director, and didactic education director prior to the schedule conflict. Any failure to make this request before exam time, or in the event of an unexcused absence, will result in a "0" score for that exam. No re-take will be allowed. If an absence is approved as excused, or if taking the exam early is approved, there will be no deduction in the raw score. This policy does not apply for absences in a course on non-test taking days (see attendance policy)

PROCEDURE:

The student is required to show up on time for all scheduled exams. Upon recognition of an emergency or urgent schedule conflict, the student will notify the instructor of record, didactic education director, associate program director, and program director. If the absence is approved as excused, the student will be allowed to take the exam at a different time that will be decided by the instructor of record. The exam format will be decided upon by the instructor of record. There will be no deduction in the maximum score. If the student request is denied, or in the event of an unexcused absence exam, the student will be allotted a 0% for that exam and will not be offered another exam or re-take opportunity.

Approved by Faculty Executive Committee on June 18, 2023


Signature

6/23/23
Date

Applies To: Students

Date of Revision: April 11, 2023

BACKGROUND:

The importance of professional attributes in a Physician Assistant (PA) must be emphasized throughout the PA curriculum. Central Michigan University's PA program will emphasize and evaluate honesty, respect, acceptance, humility, responsibility, dedication, cultural sensitivity, good judgment, and service to others. These behaviors will be emphasized in the classroom and in the clinical setting as pillars of professionalism and essential to all PA students.

PURPOSE:

To prepare Physician Assistant students for the requirements of professional practice. To achieve compliance with Accreditation Standard for Physician Assistants B2.19 which states: the Curriculum must include instruction in (a) Intellectual honesty, (b) academic integrity, and (c) professional conduct.

DEFINITIONS:

Honesty: truth in all written, verbal, and other forms of communication with faculty, preceptors, patients, and classmates. Integrity in test taking, whether on campus or off campus, is demonstrated by refraining from cheating of any kind, sharing testing topics or answers with other students, or false documentation of any kind.

Respect: demonstrates respect for the dignity of all individuals and property they encounter.

Acceptance: willingness to tolerate a difficult, unpleasant, or unfamiliar situation.

Humility: a modest view of one's own importance; humbleness

Responsibility: recognizing one's duty to deal with something or a moral obligation to behave correctly including meeting deadlines and timely submission of all assignments throughout the PA curriculum.

Dedication: demonstration of the quality of being resolute or committed to a task or purpose.

Cultural Sensitivity: showing awareness of cultural differences and similarities without assigning a positive or negative value to such differences.

Good Judgement: diligent, conscientious, and productive; abides by standards and rules; meets deadlines and follows through on assigned tasks within an appropriate designated time frame.

Service to Others: applying what is learned in the classroom and clinic to help with community challenges and problems and reflecting upon experiences to achieve a deeper understanding of future service to one's patients and community.

POLICY:

Students will be regularly evaluated throughout both the didactic and clinical phases of the PA curriculum. When infractions of any of the above professional attributes take place, attempts to remediate the student will be approached with individualized student success as the goal. Each infraction, no matter the nature of the issue, will be managed on a case-by-case basis. Every attempt of professional remediation will be with an overall goal of providing the student with the best remediation action for their infraction. Possible plans may include, but are not limited to, additional assignments to better understand professional behaviors and the expectation of the student, adjusted due dates and



Applies To: Fixed term and Tenure Faculty, Program Director, and Medical Director

Date of Revision: May 29, 2023

BACKGROUND:

ARC-PA Standard A3.09 The program must define, publish, make readily available and consistently apply policies that preclude principal faculty, the program director, and the medical director from participating as health care providers for students in the program, except in an emergency situation.

PURPOSE:

To ensure that faculty within the CMU PA program who are licensed medical providers are adhering to the standard set forth by the ARC-PA. (in standard A3.09)

POLICY:

For those CMU PA Program faculty members that are principal faculty, Medical Director, and/or Program Director agree that they will not serve as a health care provider for students unless there is an emergency situation.

PROCEDURE:

This policy is published with the ARC-PA standard definition in both the Didactic and Clinical Year Handbook for students. The faculty will sign an attestation which is housed in our database Typhon, annually, that they agree to adhere to standard A3.09 and will not serve as health care providers to our students while they are active members of the CMU PA Program.

Approved by Faculty Executive Committee on May 29, 2023

Signature

6/23/23

Date

timelines to assist students in meeting obligations in a more consistent fashion, student meetings to discuss ways to improve on unprofessional or irresponsible behaviors. If there are repeated or more serious infractions of the professionalism policy, which will be determined by the Program Director and Progress Committee, students will be referred to the Student Affairs Committee or the Office of Student Conduct where case-by-case determinations will be made based on the nature of the infraction. This could include, but is not limited to, a probationary period where students will have additional timelines or assignments to assist in the student's demonstration of professional practice, a verbal or written warning, failure of a course or clinical rotation, or de-matriculation or dismissal from the Physician Assistant program.

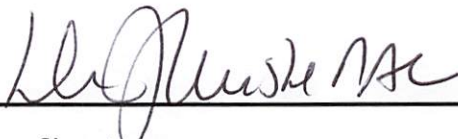
PROCEDURE:

During the didactic phase of the program, students will be evaluated for professional behaviors using a program faculty-approved evaluation at the conclusion of each semester. This evaluation is to be completed by the student's faculty advisor and at least one other faculty member each semester. If unprofessional behaviors occur, additional evaluations will be done on a case-by-case basis.

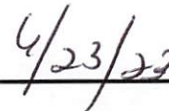
During the clinical year, SCPE preceptors will complete a final student evaluation at the conclusion of each rotation, which addresses professional behaviors. Additionally, faculty or clinical year advisors will evaluate a student routinely as part of the clinical year curriculum, as needed based on unprofessional behaviors, and within the last four months of the program as part of the summative evaluation process. The summative professionalism evaluation must be passed with an 80% to graduate from the CMU PA Program.

A supporting document entitled "Professionalism Policy Evaluation with Anchors" contains the detailed schedule for professionalism evaluation as well as the rubric and scoring table that are to be used to evaluate each student. The document is located in the policy folder, program handbook, and linked here – [Professionalism Policy Anchors.docx](#)

Approved by Faculty Executive Committee on April 11, 2023



Signature



Date

Applies To: Students

Date of Revision: June 18, 2023

BACKGROUND:

ARC-PA Standard A3.15d states *The program must define, publish, consistently apply and make readily available to students upon admission: policies and procedures for withdrawal and dismissal*

PURPOSE:

In accordance with ARC-PA standard A3.15d the CMU PA program has developed in conjunction with the office of Graduate Studies and General Counsel a policy and procedure regarding dismissal of a student from the CMU PA program.

POLICY:

In the event a student enrolled in the CMU PA program is of concern for dismissal from the program a specific policy must be followed. The student and CMU PA program will adhere to the policy and procedures set forth by the Office of Graduate Studies. The Program Director and Associate Program Director will be involved fully in this process.

PROCEDURE:

If a CMU PA student is of concern for dismissal, the following procedure will be followed:

1. Determine the reasoning regarding the dismissal and review of appropriate documentation by the Student Affairs Committee.
2. The documentation must follow the policies for dismissal set forth by the Office of Graduate Studies. ([Graduate Academic and Retention Standards](#)) and also [Academic Integrity](#). Professionalism issues will also be addressed and could result in dismissal based on documentation findings. Students must be on probation prior to dismissal for academic performance.
3. The student will be notified of a meeting to discuss dismissal from the program. This notification will come after approval of its contents by the CMU General Counsel. The student must be allowed Due Process (the student must be given notice of the dismissal discussion, the time of the meeting, and a chance to express their view of the situation).
4. A meeting will be held with the student and chosen faculty and/or College of Health Professions faculty to discuss dismissal.
5. Once the meeting has concluded, and the student has been allowed a chance to be heard, the faculty that is involved, (which will include the Program Director and Associate Director) will make a decision on dismissal.
6. If the decision is deemed dismissal of the student a [Dematriculation Form](#) must be completed and sent to the Office of Graduate Studies for review.
7. If approved, a letter is sent by the Office of Graduate Studies notifying the student they are dismissed from the CMU PA Program.



PA Program Dismissal Policy

Approved by Faculty Executive Committee on June 18, 2023

[Handwritten Signature]

Signature

6/23/23

Date



Student Employment for Program Policy

Applies To: Students

Date of Revision: June 16, 2023

BACKGROUND:

ARC-PA Standard A3.04 states *the program must define, publish, make readily available and consistently apply a policy that PA students must not be required to work for the program.*

ARC-PA Standard A3.05 states *the program must define, publish, make readily available and consistently apply a policy that PA students must not substitute for or function as: a) instructional faculty and b) clinical or administrative staff.*

PURPOSE:

To ensure that students within the CMU PA program are not required to work within or for the program and are not being substituted as instructional a) instructional faculty and b) clinical or administrative staff, thus adhering to ARC-PA standard A3.04 and A3.05.

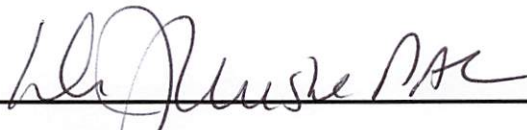
POLICY:

While enrolled in the CMU PA program, students are not allowed to work for the program. They are also not allowed to substitute or function as a) instructional faculty or clinical administrative staff while in the didactic year of the program or while on SCPE (supervised clinical practice experiences) rotations.

PROCEDURE:

This policy is published with the ARC-PA standard definition in both the Clinical year and Didactic year handbooks for reference. This is also discussed in both the New student orientation and Clinical year orientation.

Approved by Faculty Executive Committee on June 16, 2023


Signature


Date



Student Employment (Self) Policy

Applies To: Students

Date of Revision: April 7, 2023

BACKGROUND:

ARC-PA Standard A3.15e states *The program must define, publish, consistently apply and make readily available to students upon admission: e) policy for student employment while enrolled in the program,*

PURPOSE:

To comply with ARC-PA standard A3.15e and to ensure that students succeed in the PA program, it is therefore necessary to set parameters on co-existing employment outside the program.

POLICY:

Students enrolled in the CMU PA Program are permitted to work while taking courses and during Supervised Clinical Education Experiences (SCPEs). It is understood that under various circumstances, student may need to work outside of taking courses within the PA Program. However, outside employment will not be allowed to interfere with the coursework and clinical work while enrolled in the CMU PA Program. All students who are employed outside of the CMU PA Program will be held to the same standards as far as academic performance and attendance. Due to possible conflict of interest, students enrolled in the CMU PA Program will not be allowed to attend mentorship or SCPEs that are in the same location as their place (or healthcare system) of employment.

PROCEDURE:

There are no restrictions regarding employment while enrolled in the CMU PA Program. Students are not allowed to attend mentorship or SCPEs at a healthcare system or facility at which they are employed.

Approved by Faculty Executive Committee on April 7, 2023

Signature

6/23/23

Date

Applies To: Students

Date of Revision: June 17, 2023

BACKGROUND:

ARC-PA Standard A3.08 states *the program must define, publish, make readily available and consistently apply policies addressing student exposure to infectious and environmental hazards before students undertake any educational activities which would place them at risk. Those policies must: a) address methods of prevention, b) address procedures for care and treatment after exposure, and c) clearly define financial responsibility.*

PURPOSE:

To ensure clear understanding and education for student exposure to infectious and environmental hazards, and also to address methods of prevention, procedure for care and treatment, and also to determine financial responsibility.

POLICY:

In accordance with ARC-PA standard A3.08, it is a mandatory requirement while enrolled in the CMU PA Program to have health insurance coverage. Students are responsible for any costs incurred in treating injuries and illness during matriculation in the PA Program including during the clinical year (e.g., needle stick or bodily fluid exposure) and during didactic instruction. All students enrolled in the CMU PA program will undergo annual OSHA training through Success factors, the online module training program at CMU.

Following an exposure, once the student has followed the clinical site's protocol or protocol of the University if occurs on campus, the affected students must contact the Director of Clinical Education within 24 hours. The student must also complete the **STUDENT EXPOSURE FORM/Incident Form provided by the program** and follow the directions at the top of the form. Subsequently, it is filed in the PA office for tracking, with a copy sent to CMU Risk Management.

PROCEDURE:

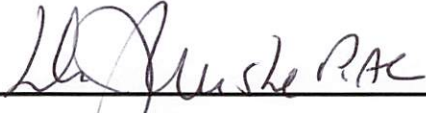
While enrolled in the CMU PA Program, the students will undergo OSHA training annually. In the event of an exposure, the student will notify the clinical site, instructor (if in didactic year), and also the Director of Clinical Education immediately. The CMU Incident form will be completed by the student. Any further forms deemed necessary by the clinical site will also be completed. All forms will be submitted to the CMU PA program for review. They will be uploaded to the database Typhon as well. The Director of Clinical Education will then inform Risk Management at CMU and submit all documentation accordingly.

The students are notified during New student orientation, and also clinical year orientation, as well written documentation stating such in both didactic and clinical year handbooks stating that they must carry their own personal health insurance, and that all medical costs, even in the case of an exposure in a clinical site, are the students financial responsibility.



Student Exposure Policy

Approved by Faculty Executive Committee on June 17, 2023


Signature


Date



Student Identification Policy

Applies To: Students

Date of Revision: June 16, 2023

BACKGROUND:

ARC-PA Standard A3.06 states the program must define, publish, make readily available and consistently apply a policy that PA students must be clearly identified in the clinical setting to distinguish them from other health profession students and practitioners.

PURPOSE:

To ensure compliance with ARC-PA standard A3.06 students in the clinical setting during the Clinical year and Mentorship time will properly identify themselves as CMU Physician Assistant Students.

POLICY:

Students are forbidden to wear a ¾ length white lab coat and must wear the short white lab coat complete with the CMU PA Program patch and name tag clearly identifying him/her as a Physician Assistant Student during any time at a clinical year site. (ARC Standard A3.06 - The program must define, publish, make readily available and consistently apply a policy that PA students must be clearly identified in the clinical setting to distinguish them from other health profession students and practitioners.)

PROCEDURE:

CMU PA students when in mentorship, clinical year, and/or all clinical setting will abide by the CMU PA Student Identification Policy by wearing a short lab coat with CMU PA Program patch, and name tag with clear identification. If a clinical setting/site asks them not to wear a white coat (common in Pediatrics), they will still wear clear identification (badge) showing that they are a PA student/medical learner.

Approved by Faculty Executive Committee on June 16, 2023

Signature

6/23/23

Date



Applies To: Students

Date of Revision: June 17, 2023

BACKGROUND:

ARC-PA Standard A3.07 states:

The program must define, publish, make readily available and consistently apply:

a) a policy on immunization and health screening of students. Such policy must be based on then current Centers for Disease Control and Prevention recommendations for health professionals and state specific mandates.

PURPOSE:

The purpose of this policy is to assure compliance with ARC-PA standard A3.07 regarding immunization status and health screening of students while enrolled in the CMU PA Program.

POLICY:

While enrolled in the CMU PA Program students must follow the current Centers for Disease Control and Prevention guidelines/recommendations regarding immunization status and screening tests for healthcare providers.

PROCEDURE:

Students who are enrolled in the CMU PA Program must provide documentation regarding immunization status and screening testing at the start date of the program and throughout/while enrolled in the CMU PA Program. This information will be updated annually and uploaded into the program database Typhon. This will be reviewed annually by the Director of Clinical Education and Placement coordinator, while enrolled in the CMU PA Program. Students will also adhere to the requirements of their clinical sites (mentorship and SCPE sites) for immunization status and screening testing, otherwise it may delay their graduation.

Approved by Faculty Executive Committee on June 17, 2023

Signature

Date



Student Incident Reporting Policy

Applies To: Any CMU Physician Assistant student while active in the program in either the didactic or clinical portion of the curriculum.

Date of Revision: May 16, 2023

BACKGROUND: The policy is to serve as a guide for PA Program faculty and staff in the event of a situation where the health and/or safety of a PA student has been compromised. This policy will provide guidance in the protection and support of our students whether the situation arises on campus or in an assigned clinical site. As faculty as well as licensed health professionals, we are tasked to be mandatory reporters. Per the Michigan individuals in health care service as well as educational services are mandated reporters and as such you may have a legal obligation to report any suspicions regarding vulnerable adults who you believe have been harmed or are at risk of harm from abuse, neglect, or exploitation. This policy is written in agreement with the Central Michigan University Policy 3-39; Sexual and Gender-Based Misconduct Policy.

<https://www.cmich.edu/docs/default-source/president's-division/general-counsel/administrative-policy-docs/3/p03039.pdf>

PURPOSE: To ensure obligations to report any suspicions or reports regarding any PA student being harmed, in any way, while on campus or while in a clinical rotation are carried out appropriately. "Harm" for the PA Program is defined as any objectionable incident that may occur including but not limited to racism, sexual misconduct, gender-based misconduct, retaliation, or intimidation. Please note this list is not all-inclusive.

POLICY: In coordination with the Office of Civil Rights and Institutional Equity (OCRIE) and CMU Policy 3-39, we must follow an appropriate procedure to insure the privacy and protection of our students, along with the protection of information sharing.

PROCEDURE: If a student reports an incident that is harmful to them whether verbal, physical, or otherwise it is the responsibility of the faculty as a mandatory reporter to do the following:

1. Notify OCRIE immediately with a short summary of the incident and the student's name
2. Remove the student from the environment, clinical rotation, or instructor as applicable effective immediately.
3. Meet with the student and offer resources and support that are available to them including counseling services at CMU.
4. Document all interaction, and/or correspondence in the Typhon database.
5. Notify the institution involved (Risk Management Office), if applicable, that the student will no longer be attending or returning to their institution. (i.e., clinical site). **Do not provide any details.**
6. Allow OCRIE to take over any actions related to the situation once you have accomplished steps 1-5. OCRIE will schedule a meeting with the student to inform them of their rights pertaining to the situation.
7. Limit all information sharing to only the Program Director and OCRIE. Protect the student's privacy. **Do not give any information to those institutions or those involved with the incident.**



Student Incident Reporting Policy

Approved by Faculty Executive Committee on June 18, 2023

[Handwritten Signature]

Signature

6/23/23

Date



Student Withdrawal Policy

Applies To: Students

Date of Revision: June 13, 2023

BACKGROUND:

ARC-PA Standard A3.15d states *The program must define, publish, consistently apply and make readily available to students upon admission: policies and procedures for withdrawal and dismissal*

PURPOSE:

To comply with ARC-PA Standard A3.15d the CMU PA program will notify students of the current withdrawal policy. Withdrawing from an individual course would necessitate rematriculating to the next cohort as all courses need to be finished sequentially to prepare for clinical year and subsequent graduation from the CMU PA Program. Withdrawal proceedings follow the CMU guidelines through the office of the Registrar. Withdrawal information for Central Michigan University can be found [here](#)

Any student needing to withdrawal from a course, or the CMU PA program, would need to do so by the CMU designated timeline to be refunded tuition and potentially be placed in the upcoming cohort should they meet the criteria to do so.

POLICY:

Students requesting withdrawal from a course, or the entire CMU PA program, will need to contact the CMU PA Program Director first, followed by the instructor of record, and their advisor.

PROCEDURE:

If a student would like to withdrawal from a course or the PA program, they will need to contact the instructor of record, their advisor, and the CMU PA Program Director. A meeting will be scheduled with the student to discuss withdrawal reasonings. The information will be presented to the Student Progress Committee. Discussion will include rematriculation with the upcoming cohort if the student desires, and full withdrawal from the CMU PA program. A decision will be made and discussed in a further follow up meeting with the student and the Program Director. The Registrar's office will be contacted by the Program Director and the student for further proceedings once a decision has been made. If full withdrawal from the program/dismissal is the decision, the Office of Graduate Studies will also be contacted. (see Student Dismissal policy)

Approved by Faculty Executive Committee on June 13, 2023

Signature

Date



Applies To: Students

Date of Revision: April 7, 2023

BACKGROUND:

Students enrolled in the PA program may present with a myriad of medical issues. The Central Michigan University Physician Assistant Program want to accommodate to the best of our ability all medical issues and disabilities. As a result, some students may be prescribed controlled substances as a treatment modality. Students must attend courses and clinicals in a sober state. At no time can a controlled substance of any kind create a state of altered mental status that jeopardizes learning and patients. We at CMU strive to not only serve and protect our students, but their future patients as well. Students who take a prescribed controlled substance must therefore not be impaired in the classroom or clinical setting.

PURPOSE:

The Central Michigan University Physician Assistant Program is committed to protecting the health, safety, and welfare of its students, staff, and patients. To carry out this commitment, the PA Program seeks to assure that a drug-free workplace is maintained and that students perform their duties unimpaired by the effects of alcohol and controlled substances, including cannabis.

A critical part of Physician Assistant education involves the learning experience in hospitals and other health care facilities. Use of these facilities for training is essential, and students must be able to complete their assigned rotations. Hospitals and health care facilities have their own policies regarding substance use and require that the Physician Assistant Program have all students complete an annual drug screen prior to allowing them to rotate at their facilities.

DEFINITIONS:

Controlled Substance: any substance controlled by the DEA requiring special licensure to prescribe. Controlled substances can be legitimate (legal and prescribed) and illegitimate (illegal and non-prescribed).

POLICY:

The CMU Physician Assistant Program may require substance use testing of students at any time, including testing of students by affiliates, as a condition of participation with the affiliate and continued enrollment in the Physician Assistant Program, consistent with Physician Assistant Program Technical Standards of Professionalism, sobriety is expected in all academic and clinical environments.

PROCEDURE:

The Physician Assistant Program recognizes that PA students may exhibit patterns and behaviors suggestive of a substance use disorder. The Physician Assistant Program is committed to assisting students struggling with substance use to regain their health while protecting the well-being of patients, classmates, faculty, and staff. Educational programs and resource information will be posted and made available through the Office of Student Conduct. Students with any specific concerns are encouraged to meet with the Office of Student Conduct. Students may be tested for psychoactive substances or alcohol at any time based upon a reasonable cause as determined solely by the CMU PA Program including but not limited to:

- a. Any concern about student conduct that is consistent with alcohol or substance use
- b. Any concern about student academic performance, including but not limited to, a failing grade in any course or clerkship



Substance Use Policy

- c. Administrative evaluation such as when any student returns from a leave of absence or extended rotation away from the PA Program
- d. Information provided by other students, faculty, staff, or police and deemed credible by the Physician Assistant Program
- e. Any student who self-reports a concern or problem that is consistent with substance use

Students shall be notified of the required testing for controlled substances. Students who test positive on the initial test may request a second test using the same specimen. Students who refuse to be tested will be considered to have a positive result for the test. Any students who's initial and second test results are positive (either through an actual test or refusal to undergo a test) and who do not have a prescription for the substance for which they have tested positive, are in violation of this policy. The Student Affairs Committee will review the report, in collaboration with the Office of Student Conduct, and allow the student an opportunity to address the results. The student may have an opportunity to provide a written response to the findings. If the Student Affairs Committee and Office of Student Conduct find sufficient evidence to suggest a violation of this policy, this will result in the recommendation for treatment and/or disciplinary action, including potential dismissal from the CMU PA Program.

Approved by Faculty Executive Committee on April 7, 2023

Signature

Date

Applies To: CMU PA Program Policies

Date of Revision: June 17, 2023

BACKGROUND:

ARC-PA Standard A3.01 states *Program policies must apply to all students, principal faculty and the program director regardless of location. A signed clinical affiliation agreement or memorandum of understanding may specify that certain program policies will be superseded by those at the clinical site.*

PURPOSE:

To comply with ARC-PA standard A3.01 we must adhere to CMU PA program policies application to all students, principal faculty, and program director regardless of location. When in a clinical site, a clinical affiliation agreement or memorandum of understanding may specify that certain program policies will be superseded by those at a clinical site.


POLICY:

CMU PA Program policies apply to all students, principal faculty, and the program director regardless of location. Program policies and practices are consistently applied to all student, staff, and faculty groups as stated in each policy and practice. A signed clinical affiliation agreement or memorandum of understanding may specify that certain program policies will be superseded by those at the clinical site.

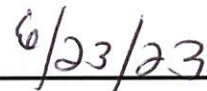
PROCEDURE:

Program policies are uniform throughout the program regardless of geographic location except for specific clinical sites which may have specific policies that supersede CMU PA Program policy. Any such conflict must be reviewed by the University General Counsel and Agreements staff before signing a contract to be sure that the policy does not conflict with the CMU's policies, or federal/state/municipal law to the point that an affiliation with the institution is not possible. CMU PA program policies are consistent with university wide policies of fairness with respect to the rights and responsibilities of students, staff, faculty, and program leadership.

Approved by Faculty Executive Committee on June 17, 2023



Signature



Date



Applies To: Students

Date of Revision: February 2023

BACKGROUND:

Clinical year students are required to take an End of Rotation Exam (EORE) administered through PAEA (Physician Assistant Education Association) at the end of each core rotation, excluding the Elective rotation.

There is a total of 7 EORE disciplines including Family Medicine, Internal Medicine, Women's Health, Psychiatry, General Surgery, Pediatrics, and Emergency Medicine. PAEA provides access to two versions of each exam for all disciplines except for Family Medicine which has three. Each EORE, for each discipline is taken the week following the completion of a particular rotation.

The PA program is responsible to ARC-PA (Accreditation Review Commission on Education for the Physician Assistants) for maintaining ongoing remediation for students, (per Standards A3.15, A3.17) particularly in the case of the clinical year students that did not meet the passing score required for the EORE.

The scoring requirements for the EORE are determined by the faculty in consideration of the national average scores and self-assessment data and findings as well as the PANCE predicted scores for the CMU PA student

PURPOSE:

To define clear guidelines and action steps for students in the Clinical year regarding remediation for those that are unable to fulfill the academic requirements of the EORE.

DEFINITIONS:

EORE: End of Rotation Exam

Remediation: The process of improving or correcting a situation. Remediation is an ARC-PA requirement for those students that do not show mastery in a subject. (B4.01b)

Callback: The week between each rotation in which the students return to CMU Campus for testing and lectures

POLICY:

Students will be allowed two attempts to pass an EORE specific to one of the 7 required disciplines. If they do not pass the second version of the exam, they will fail the rotation.

After one failed rotation due to poor performance in academic testing they will be allowed to move on to the next rotation but are required to repeat the failed rotation later in their clinical year. They will be required to sit for another EORE; determined by PAEA or the PA program for the repeated rotation.

If a clinical year student does not meet the passing score on the first EORE of a rotation after the failed rotation, they will be paused from the next scheduled 5-week rotation.

During the 5-week timeframe, the student will enter and participate in remediation with the Clinical Education Director and PA program faculty.

Remediation will incorporate the creation of a weekly study plan and weekly face-to-face meetings with a designated faculty member. The faculty member will participate in the remediation of the student at all points of the process. The face-to-face meetings will consist of discussions about content directly related to the most recent failed EORE.

*The goal of the program is to assign faculty to remediating students based on their area of interest, instruction, or clinical practice.



Clinical Year Remediation Policy

Once the 5 weeks of remediation is complete, the student will sit for the second version of the EORE that was failed during callback for their most recent clinical rotation. The student will sit for version 2 of the EORE exam at the same time as their cohort in the callback week.

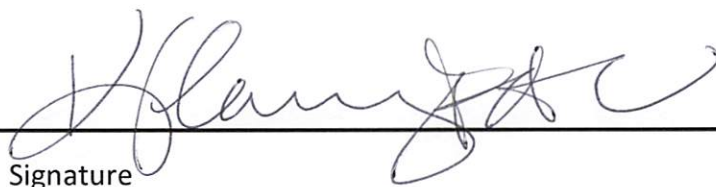
If they fail the second EORE after completing remediation, they will be paused from progression in the clinical year and attend a scheduled meeting of the Student Progress Committee to determine the program and student's next steps in the student pursuit of PA Education.

PROCEDURE:

1. If a student were to fail a clinical rotation by failing both versions of the EORE exams for the completed discipline, that student is required to repeat the rotation later in the Clinical Year which will result in a delay in their graduation date.
2. As student progresses to the next scheduled clinical rotation, if they successfully complete the clinical training but fail the first EORE on that discipline, the student will be "paused" in the clinical schedule to implement 5 weeks of remediation.
3. The student will spend the 5 weeks participating in remediation activities as determined by Clinical Education Director and take the second version of the EORE from the most recent clinical rotation at the upcoming Callback.
4. If the student does not pass their 2nd attempt at the EORE, which would at that point equate to a total of 4 failed EORE's and subsequently 2 failed clinical rotations of the 8 required, the student will be paused in the clinical year with the following as possible outcomes.
 - Audit of the courses offered in the didactic year that are remaining and restart the clinical year the following fall with the next PA cohort.
 - Dismissal from the program
 - Further remediation/pause from Clinical Rotations
5. Once a student has resumed clinical rotations the following year after a didactic audit, or once they have already done one pause for remediation, if they do not pass the upcoming EORE, making a total of 5 failed EOREs it will result in the following:
 - Dismissal from the program
 - Audit of the courses offered in the didactic year that are remaining and restart the clinical year the following fall with the next PA cohort (IF they have not done this already)

The result of the students standing in the program will be determined after a meeting between the student and the Student Progress Committee.

Approved by Faculty Executive Committee on February 2023


Signature

6/23/23

Date



Purpose- to explain in detail the proper procedure for eliciting clinical site placements within various healthcare facilities.

- In the second semester of the didactic year of a cohort, a survey will be circulated for students to rank their preferred area of clinical placement. The students will have two weeks to complete and return the survey. If a survey is not submitted, the student will be placed based on the needs of the program.
- They will also have an opportunity to write a small letter of necessity, for those that may have circumstances that will keep them in a particular part of Michigan, such as spouse, home, children, etc.
- Once results are evaluated, the clinical team; Director of Clinical Education, Clinical Coordinator and Clinical Placement Coordinator assign student to “areas” within the state of Michigan for their clinical rotations.
- In an atmosphere of increasing competition for clinical sites, the ensuing procedure is to be followed. This will allow the PA Program the opportunity to successfully align with CMED, MyMichigan, Corewell, McLaren and other healthcare systems in the future.

Procedure-

The site placements are made by the clinical placement coordinator and discussed with the Director of Clinical Education and Clinical Coordinator. In compliance with ARC-PA standard A3.03 the students are not allowed to solicit clinical sites. *(A3.03 The program must define, publish, make readily available and consistently apply a policy for prospective and enrolled students that they must not be required to provide or solicit clinical sites or preceptors.)*

CMED

- When proposing placements within any CMED facility or branch campus, all requests are to be made through the Placement Liaison for CMED and the PA program.
- Once placement requests are made, the liaison will inform the clinical placement coordinator of the approved sites and dates.
- Do not contact preceptors or the point of contact for a preceptor directly unless requested to do so by the Associated Dean for Clinical Education at CMED.

My-Michigan Healthcare System

- When proposing placements at any My- Michigan facility, inpatient our outpatient, all requests must go through the Office of Academic Affairs.
- The point of contact is Brandi Borchardt- Academic Affairs Manager.
- Once placements are confirmed with My-Michigan, the information must be shared with the office of the Associate Dean of Clinical Education as a courtesy.
- Do not contact preceptors or the point of contact for a preceptor directly unless requested to do so by the Academic Affairs Manager.



McLaren Healthcare system

- All rotation requests for placements with McLaren offices are placed in ACEMAPP for approval.
- Do not contact any providers through McLaren for placements in offices.
- Any requests for McLaren that are ONLY in the hospital's may be sent to the preceptor. These are not placed in ACEMAPP.

Corewell Health System

- The Corewell Health System uses an education coordinator. All requests must be given annually to the coordinator, and/or at a minimum of 60 days prior to the rotation.
- When proposing placements with Corewell, all requests are sent to Lynn McBurney who will confirm or deny rotations.
- Do not contact any providers through Corewell for placements.

- All remaining placements at other institutions may be made by the Clinical Placement Coordinator after discussion and approval by the clinical team.
- An update regarding placements will be presented at the clinical team weekly.
- Any instances where a student must be displaced more than 60 miles from their assigned "area" for a rotation must be discussed and agreed upon by the clinical team before the re-assignment is made.
- All communication between the Clinical Placement Coordinator and any healthcare system or clinical facility will take place at the personnel level as directed above.
- If not specified above, any communication that the CPC has with a clinical facility is to be with other clinical placement coordinators or clinical contacts.
- Any communications with administrators of a facility will be done by the Program Director or Director of Clinical Education on behalf of the PA program.
- It is the responsibility of the CPC to inform the PD or DCE when conversations with administrators are necessary to accommodate placement of a CMU PA student.
- The schedule for each class will be available for presentation to the Healthcare systems and other facilities at the time of the new cohort orientation in March. This will allow for early organization and planning on behalf of the above-mentioned healthcare systems. This schedule will be provided by the Director of Clinical Education.
- It is the shared responsibility of the Clinical Placement Coordinator and the Clinical Administrative Assistant to keep all clinical site information up to date in Typhon- this is to include primary and secondary contact name, number and email, primary preceptor name, phone number and email and the address of the facility. This is necessary for visits (physical or digital) of new sites prior to placement of students as required by ARC-PA (C2.01).



Student Clinical Site Placement Policy

Approved by Faculty Executive Committee

A handwritten signature in black ink, appearing to read 'H. L. ...' with a large flourish at the end.

6/21/21

Signature

Date

Applies To: Clinical Team faculty & staff

Date of Revision: June 6, 2023

BACKGROUND:

In accordance with ARC-PA standard C2.01 that states:

C2.01 The program must define and maintain effective processes and document the initial and ongoing evaluation of all sites and preceptors used for supervised clinical practice experiences, to ensure students are able to fulfill program learning outcomes with access to

a) physical facilities, b) patient populations, and c) supervision.

PURPOSE:

To ensure that the CMU PA program is compliant with standard C2.01, there will be a specific policy regarding initial and ongoing clinical site visits. The visits will ensure that clinical sites meet or still meet expectations of the program, learning outcomes of the rotation, and also ARC-PA standard C2.01 including physical facilities, patient populations, and supervision.

POLICY:

The CMU PA Program Clinical Team faculty and staff will evaluate established clinical sites with the Clinical Year Site Visit -Ongoing form housed in Typhon every other year for active sites. The site visit will be arranged through the point of contact in Typhon. This will include a tour of the facility, as well as meeting with the primary preceptor if available and/or office manager and staff. These will be scheduled at least one week in advance by a member of the clinical team.

A schedule of upcoming sites and needs for visits will be discussed at biweekly clinical team meetings. Visits can be carried out individually or in clusters. The CMU PA program encourages visitors to schedule multiple visits in a particular area when possible. The CMU PA program will cover transportation costs of the visits including utilization of a rental car when needed.

PROCEDURE:

A member of the Clinical Team will notify the student and/or site at least one week in advance and coordinate a site visit. The site visit will include a tour of the facility, meeting with preceptors and/or managers and staff. The visit will be documented in the Clinical Year Database Typhon under Clinical Year Site Visit (ongoing) for established sites. If this is a new site, the site will be vetted by the Director of Clinical Education and/or Clinical Coordinator prior to the student arriving at the site to verify safety, facilities, and supervision and documented in Typhon under Clinical Year Site Visit (initial). At the initial site visit all information will be provided to the preceptor and staff regarding expectations, learning outcomes, and preceptor packet for that particular rotation.



Clinical Year Site Visit Policy

Approved by Faculty Executive Committee on June 6, 2023

Signature

A handwritten signature in black ink, appearing to read 'H. [unclear] PAC', written over a horizontal line.

Date

6/23/23



Policy: Initial Site Usage/Vetting Process

Corresponding ARC standards:

C2.01 (The program must define and maintain effective processes and document the initial and ongoing evaluation of all sites and preceptors used for Supervised Clinical Practice Experiences (SCPEs), to ensure students are able to fulfill program learning outcomes with access to physical facilities, patient populations, and supervision.)

B3.01 The program must secure clinical sites and preceptors in sufficient numbers to allow all clinical students to meet the program's learning outcomes for supervised clinical practice experiences.

B3.02 Clinical sites and preceptors located outside of the United States must only be used for elective rotations.

B3.03 Supervised clinical practice experiences must enable all students to meet the program's learning outcomes: a) for preventive, emergent, acute, and chronic patient encounters, b) across the life span, to include infants, children, adolescents, adults, and the elderly, c) for women's health (to include prenatal and gynecologic care), d) for conditions requiring surgical management, including pre-operative, intra-operative, postoperative care, and for e) behavioral and mental health conditions.

B3.04 Supervised clinical practice experiences must occur in the following settings: a) emergency department, b) inpatient, c) outpatient, and d) operating room.

B3.05 Instructional faculty for the supervised clinical practice portion of the educational program must consist primarily of practicing physicians and PAs.

B3.06 Supervised clinical practice experiences should occur with a) physicians who are specialty board certified in their area of instruction, b) NCCPA certified PAs, or c) other licensed health care providers qualified in their area of instruction.

B3.07 Supervised clinical practice experiences must occur with preceptors who enable students to meet program defined learning outcomes for: a) family medicine, b) emergency medicine, c) internal medicine, d) surgery, e) pediatrics, f) women's health including prenatal and gynecologic care, and g) behavioral and mental health care.

Process:

After new SCPE has been confirmed by the clinical placement coordinator the following will be completed to ensure the site is appropriate and meets all standards.

1. Lead Preceptor will have license and credentials verified utilizing LARA/State of MI website. We will also verify certifications including board certification and NCCPA certification.
2. Learning Outcomes of SCPE and topic outlines, will be sent to site/preceptor to verify their commitment and ability to meet all goals/objectives for the SCPE in which they have been recruited.



Clinical Year Policies

3. Clinical Coordinator will visit clinical site and preceptor, with preceptor packet and information, either in person or virtually, prior to students starting at site/within first 2 weeks of rotation.
 4. All student evaluations of site and preceptor will be carefully reviewed by the director of Clinical Education or clinical coordinator to ensure learning objectives are accomplished.
 5. End-of-Rotation Scores will be monitored for any deficiencies that may be related to lack of experiences, patient encounters, or learning opportunities.
- 1.

Evaluation/Assessments Utilized	Frequency of Assessment
Clinical Year-Site Visit (Initial) Evaluation	Prior to beginning of SCPE/within first two weeks of student presence
Clinical Year -Site Visit (Ongoing) Evaluation	Every 2 years thereafter (routine) and as needed
Student Evaluation of Preceptor	Every Rotation; due on the last day
Student Evaluation of Clinical Site	Every Rotation; due on the last day
End of Rotation Exam Score	Every Rotation; taken during Callback week

Policy: Ongoing site vetting and accreditation

Corresponding ARC standards:

C2.01 (The program must define and maintain effective processes and document the initial and ongoing evaluation of all sites and preceptors used for SCPEs, to ensure students are able to fulfill program learning outcomes with access to physical facilities, patient populations, and supervision.)

B3.01 The program must secure clinical sites and preceptors in sufficient numbers to allow all clinical students to meet the program’s learning outcomes for supervised clinical practice experiences.

B3.02 Clinical sites and preceptors located outside of the United States must only be used for elective rotations.

B3.03 Supervised clinical practice experiences must enable all students to meet the program’s learning outcomes: a)for preventive, emergent, acute, and chronic patient encounters, b) across the life span, to include infants, children, adolescents, adults, and the elderly, c) for women’s health (to include prenatal and gynecologic care), d) for conditions requiring surgical management, including pre-operative, intra-operative, postoperative care, and for e) behavioral and mental health conditions.

B3.04 Supervised clinical practice experiences must occur in the following settings: a) emergency department, b) inpatient, c) outpatient, and d) operating room.

B3.05 Instructional faculty for the supervised clinical practice portion of the educational program must consist primarily of practicing physicians and PAs.

B3.06 Supervised clinical practice experiences should occur with a) physicians who are specialty board certified in their area of instruction, b) NCCPA certified PAs, or c) other licensed health care providers qualified in their area of instruction.



Clinical Year Policies

B3.07 Supervised clinical practice experiences must occur with preceptors who enable students to meet program defined learning outcomes for: a) family medicine, b) emergency medicine, c) internal medicine, d) surgery, e) pediatrics, f) women’s health including prenatal and gynecologic care, and g) behavioral and mental health care.

Process:

During the scheduling process, the clinical team (placement coordinator/clinical coordinator) will utilize Typhon software to identify any core/required rotation sites that require updated evaluation. This information will then be disseminated among the remaining team members during weekly clinical team meetings. Additionally, status of the affiliation agreement with site/preceptor will be verified as active. Site visits will be planned accordingly with in-person site visits to preceptors being optimal, but virtual site visits also being acceptable. This visit will serve to ensure that students have necessary access to required patient population for the rotation, as well as the physical facilities and appropriate supervision. Site visits will also be a time to converse with the preceptor and ensure they have been provided goals/objectives of the rotation.

All evaluations, including student evaluation of clinical site and preceptor, will be reviewed by members of the clinical team after each rotation, to ensure there are no large or consistent deficiencies that indicate the need to discontinue student placement at the site.

Evaluations Utilized (Found in Typhon)	Frequency of Assessment
Clinical Year Site Visit (ongoing) – Clinical staff	Revised Clinical Site Visit evaluation will be conducted either in-person, or virtually on a biennial
Evaluation of Clinical Site - Student	Students will complete an evaluation of clinical site at the conclusion of each rotation.
Evaluation of Preceptor - Student	Students will complete an evaluation of preceptor at the conclusion of every rotation.

Policy: Student placement in Pod/SCPE schedule for Clinical Year

Corresponding ARC standards:

B3.03 Supervised clinical practice experiences must enable all students to meet the program’s learning outcomes: a)for preventive, emergent, acute, and chronic patient encounters, b) across the life span, to include infants, children, adolescents, adults, and the elderly, c) for women’s health (to include prenatal and gynecologic care), d) for conditions requiring surgical management, including pre-operative, intra-operative, postoperative care, and for e) behavioral and mental health conditions.

B3.04 Supervised clinical practice experiences must occur in the following settings: a) emergency department, b) inpatient, c) outpatient, and d) operating room.



Clinical Year Policies

B3.05 Instructional faculty for the supervised clinical practice portion of the educational program must consist primarily of practicing physicians and PAs.

B3.06 Supervised clinical practice experiences should occur with a) physicians who are specialty board certified in their area of instruction, b) NCCPA certified PAs, or c) other licensed health care providers qualified in their area of instruction.

B3.07 Supervised clinical practice experiences must occur with preceptors who enable students to meet program defined learning outcomes for: a) family medicine, b) emergency medicine, c) internal medicine, d) surgery, e) pediatrics, f) women's health including prenatal and gynecologic care, and g) behavioral and mental health care.

Process:

CMU PA Program clinical placements are unique in comparison with many other PA programs in that we do not have affiliation with a medical school or health system that centralizes student placement. Because of this, we place students throughout the state of Michigan in various health systems. Because of this system, we strive to place students in a centralized location or "pod" which represent a generalized area where the majority of their SCPEs are located (ideally within 90 miles).

- ***Note – Although the program strives to place students within their designated pods for all SCPEs, it reserves the right to place students in SCPEs outside of the generalized pod area, if necessary. The program may also reassign a student to a new pod during the clinical year if it is deemed necessary.***

Currently, pods are in the following areas in Michigan (subject to change on yearly basis):

1. Sault St. Marie
2. Marquette
3. Tri-Cities (Midland/Bay City, Saginaw)
4. Saginaw
5. Gaylord/Grayling
6. Alpena
7. Ludington
8. Manistee
9. Mt. Pleasant
10. Alma
11. Flint
12. Flint/Owosso
13. Flint/Ann Arbor
14. Greenville
15. Muskegon
16. Lansing
17. Jackson/Hillsdale
18. Marshall/Kalamazoo/Battle Creek
19. Tawas



20. Lapeer

Within each pod, there are a variable number of students placed which is determined by site and preceptor availability.

Pod Selection: Students are given the opportunity to voice their preference for pod assignments in the clinical year in two ways:

1. Students may write a letter of special consideration. The clinical team will accept a letter requesting consideration for a particular pod based on having children/dependents located in that area, having a mortgage in that pod area, having a spouse in that pod area, or having significant chronic medical diagnoses that require physician access in a particular pod location. Students are aware that there is no guarantee of placement in their specified area regardless of letter for consideration and have agreed and attested to their willingness to be placed anywhere in the state of Michigan for the clinical year.
2. Students will be given a survey which allows them to choose their top five pod locations. The clinical team will endeavor to place all students in one of their top five choices, however, when multiple students select the same pods, the clinical team will randomly select and place students in areas that the program has affiliation and rotations with to provide students with quality clinical rotations that meet the program defined goals and objectives.

Pod Placement: The clinical team will meet after all student surveys have been received, typically in December/January, to place students in pod locations across the state. The following criteria will be utilized, the determination of priority is in the following order: :

1. Placing students based on letters of special accommodation as described above.
2. Placing students in one of their top 5 selected pod locations.
3. Placing students where there are pods that need to be utilized to maintain rotations and affiliation where the clinical team feels the student will excel.
4. The last option, when all of the above placement methods have been exhausted will be to draw names randomly and fill the remaining locations. This method will be used as little as possible in favor of a more thoughtful placement process.

Student Notification of Placement: Students will receive an email from the clinical team to inform them of their pod placement. They will be advised of a 1-week waiting period to properly research and consider the site prior to reaching out to anyone on the clinical team to discuss the placement. Students are able to request placement with a particular preceptor that they are familiar with. Students will provide the proposed preceptor's contact information to the program and the clinical team will follow up with the appropriate educational office and preceptor to see if the rotation is feasible. Students will never be required to supply preceptors or sites and will be made aware that any preceptor or site information that they share is completely voluntary.

Rotation Meetings with Student: Whenever possible, the placement coordinator and/or members of the clinical team will have a brief meeting with each student in the late spring/early summer, prior to their clinical year start, to discuss the clinical rotation plan for the year. This is not a time to debate placements. This is a time for students to ask questions about preceptors, sites, or locations that they



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may be in. If the student has concerns related to their schedule, they will be directed to schedule a meeting for further discussion with the director of clinical education.

Rotation Confirmations: In an effort to maintain a positive and professional relationship with all sites and preceptors, the program strives to make no changes to any SPCE once they have been confirmed. Only in the most necessary or dire of circumstances should canceling, rescheduling, or changing confirmed rotations be done. Students will be made aware of this policy.

Evaluations Utilized: N/A

Frequency of Assessment: N/A

Policy: Elective SCPE Placement

Corresponding ARC standards:

B3.05 Instructional faculty for the supervised clinical practice portion of the educational program must consist primarily of practicing physicians and PAs.

B3.06 Supervised clinical practice experiences should occur with a) physicians who are specialty board certified in their area of instruction, b) NCCPA certified PAs, or c) other licensed health care providers qualified in their area of instruction.

Process:

During the last half of the PHA690 course, students will have the opportunity to review a list of various preceptors and sites for clinical elective rotations across the state of Michigan. Students are also welcomed to suggest possible sites/preceptors in an area/discipline that may not be included on the existing list. Students will then provide their top two elective choices by a prescribed due date (to be determined each year). Placement will be done utilizing the following criteria:

1. Students requesting a rotation within their assigned geographic pod will be given priority for placement.
2. The placement process will follow the typical protocol with preceptor/office manager/education office being contacted for rotation placement. If the student's first option is not able to be placed, the placement coordinator will move on to the second preference. If the second preference is not able to be placed, the placement coordinator will contact the student to work on additional site possibilities.
3. Once a rotation has been confirmed (will appear in Typhon on student schedule) there will be no changing or canceling the rotation.

Evaluations Utilized:

1. Elective survey

Frequency of Assessment:



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1. Once yearly – during PHA690 (typically completed by October).

Policy: Determination of Sites/Preceptors that the program will no longer utilize for SCPEs/Mentorship

Corresponding ARC standards:

C2.01 (The program must define and maintain effective processes and document the initial and ongoing evaluation of all sites and preceptors used for SCPEs, to ensure students are able to fulfill program learning outcomes with access to physical facilities, patient populations, and supervision.)

B3.05 Instructional faculty for the supervised clinical practice portion of the educational program must consist primarily of practicing physicians and PAs.

B3.06 Supervised clinical practice experiences should occur with a) physicians who are specialty board certified in their area of instruction, b) NCCPA certified PAs, or c) other licensed health care providers qualified in their area of instruction.

Process:

Criteria utilized for discontinuing a relationship with a preceptor/site will be undertaken with diligence and consideration of all pertinent information. The following would be examples (not all-inclusive) of reasons that would prompt the discontinuation of student placement with a preceptor, however, individual circumstances will always be considered with student safety and wellbeing being placed as the highest importance. If there is a site or preceptor evaluation that falls below the 70% benchmark, a member of the clinical team (clinical coordinator or director of clinical education) will communicate with the student regarding the site/preceptor issues to determine if there is a site/preceptor issue that can be remediated or if that is not feasible:

1. Preceptors that no longer remain licensed. *(student will not be placed)*
2. Preceptors that have had sanctions against their license that are disconcerting or that in any way suggest they may not be an appropriate location for student learning. *(will be assessed on case-by-case basis)*
3. Preceptors that make inappropriate comments or overtures towards students. *(will result in immediate removal of student)*
4. Preceptors/Sites who for any reason, (patient type/load, interest in teaching, distraction, etc.) do not help the student meet the learning outcomes of the rotation or ensure the students access to the physical facilities and proper supervision.
5. Preceptors/sites that despite programmatic efforts at remediation, continue to have any deficiencies in helping students to achieve SCPE learning outcomes.

If a preceptor or site will no longer be utilized by the PA program, the name of the preceptor will be listed on the CHP drive under the “Removed Preceptor” document and will be updated accordingly and distributed to the clinical team with all updates.

Evaluations Utilized	Frequency of Assessment
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Student Evaluation of Clinical Site	Students evaluate clinical site after every rotation.
Student Evaluation of Preceptor	Students evaluate preceptor after every rotation
Clinical Year Site Evaluation (ongoing)	Clinical sites will be evaluated at least biennially and as needed
Preceptor Final Evaluation of student	Preceptors complete final evaluation of each student at end of rotation.
End of Rotation Exam Results	Students take end of rotation exam at the conclusion of each rotation.
List of Preceptors/Sites that are no longer utilized	List of preceptors/sites that are no longer utilized for SCPE placement is updated as needed and regularly reviewed by clinical team

Policy: Evaluation/Assessment of students in SCPEs

Corresponding ARC standards:

B4.01 The program must conduct frequent, objective, and documented evaluations of student performance in meeting the program’s learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components. The evaluations must: a) align with what is expected and taught and b) allow the program to identify and address any student deficiencies in a timely manner

Process:

Clinical Year students are evaluated by their primary preceptor via a mid-evaluation due at the end of the 3rd week of the 5-week rotation, and again at the final evaluation due on the last day of the 5th week of the rotation. These evaluation templates are sent to preceptors 5 days in advance through online evaluation/Clinical Year database: Typhon.

Evaluations Utilized:

1. Elective Final evaluation
2. Emergency Medicine Final Evaluation
3. Family Practice Final Evaluation
4. General Surgery Final Evaluation
5. Internal Medicine Final Evaluation
6. Mid Rotation Evaluation Clinical Year
7. Pediatrics Final Evaluation
8. Psychiatry/Behavioral Health Final Evaluation
9. Women’s Health Final Evaluation



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Clinical Year Advising

A3.10 The program must define, publish, make readily available and consistently apply written procedures that provide for timely access and/or referral of students to services addressing personal issues which may impact their progress in the PA program.

During the Clinical Year, students will have one in person advising appointment at their clinical site. This will be documented in the PA Program Database, Typhon. (Clinical Year Student Advising- Full Visit)

They will also have an opportunity either virtually or during Callback week to meet with an advisor for a short check in.

The goal is to meet with each student in the Clinical year at least once per semester, and at any request of the student.

If an advisor identifies an area of concern that will require referral for personal issues that could impact their progress in the PA Program, immediate referral and or information will be given to the student (ARC-PA standard A3.10). All areas of concern will be documented in Typhon, the Program Director will be notified, and further follow up scheduled.

Approved by Faculty Executive Committee



Signature



Date